

Form 5500

Annual Return/Report of Employee Benefit Plan

OMB Nos. 1210-0110 1210-0089

2024

This Form is Open to Public Inspection

Department of the Treasury Internal Revenue Service

Department of Labor Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

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

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

Part I Annual Report Identification Information

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

- A This return/report is for: a multiemployer plan, a multiple-employer plan, a single-employer plan, a DFE, etc.
B This return/report is: the first return/report, the final return/report, an amended return/report, a short plan year return/report, etc.
C If the plan is a collectively-bargained plan, check here.
D Check box if filing under: Form 5558, automatic extension, the DFVC program, special extension, etc.
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: JME INC 401(K) PROFIT SHARING PLAN & TRUST
1b Three-digit plan number (PN): 001
1c Effective date of plan: 07/16/2015
2a Plan sponsor's name (employer, if for a single-employer plan): JME INC
2b Employer Identification Number (EIN): 95-4536494
2c Plan Sponsor's telephone number: 818-899-8818
2d Business code (see instructions): 335100

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:<br><b>a</b> Sponsor's name<br><b>c</b> Plan Name  | <b>4b</b> EIN                              |     |
|   | <b>4d</b> PN                               |     |
| <b>5</b> Total number of participants at the beginning of the plan year   | <b>5</b>                                   | 132 |
| <b>6</b> Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines <b>6a(1)</b> , <b>6a(2)</b> , <b>6b</b> , <b>6c</b> , and <b>6d</b> ).<br><b>a(1)</b> Total number of active participants at the beginning of the plan year .....<br><b>a(2)</b> Total number of active participants at the end of the plan year .....<br><b>b</b> Retired or separated participants receiving benefits.....<br><b>c</b> Other retired or separated participants entitled to future benefits .....<br><b>d</b> Subtotal. Add lines <b>6a(2)</b> , <b>6b</b> , and <b>6c</b> .....<br><b>e</b> Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. ....<br><b>f</b> Total. Add lines <b>6d</b> and <b>6e</b> .....<br><b>g(1)</b> Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item) .....<br><b>g(2)</b> Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) .....<br><b>h</b> Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested..... | <b>6a(1)</b>                               | 83  |
|   | <b>6a(2)</b>                               | 82  |
|   | <b>6b</b>                                  | 0   |
|   | <b>6c</b>                                  | 58  |
|   | <b>6d</b>                                  | 140 |
|   | <b>6e</b>                                  | 0   |
|   | <b>6f</b>                                  | 140 |
|   | <b>6g(1)</b>                               | 125 |
| <b>6g(2)</b>  | 134  |     |
| <b>6h</b>   | 0  |     |
| <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

**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)

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

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

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

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

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

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

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

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

|   |  |            |
|---|--|------------|
| <b>A</b> Name of plan<br><b>JME INC 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<br><b>JME INC</b> | <b>D</b> Employer Identification Number (EIN)<br><b>95-4536494</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>PAYCHEX SECURITIES CORPORATION</b> | <b>225 KENNETH DRIVE<br/>ROCHESTER, NY 14623</b> |
| <b>16-1486352</b>                     |  |

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

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

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

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

LPL FINANCIAL

RP COMPENSATION PROCESSING  
PO BOX 502533  
SAN DIEGO, CA 92150

04-3046611

| (b)<br>Service Code(s) | (c)<br>Relationship to employer, employee organization, or person known to be a party-in-interest | (d)<br>Enter direct compensation paid by the plan. If none, enter -0-. | (e)<br>Did service provider receive indirect compensation? (sources other than plan or plan sponsor) | (f)<br>Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures? | (g)<br>Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-. | (h)<br>Did the service provider give you a formula instead of an amount or estimated amount? |
|------------------------|---|--|--|--|---|--|
| 26                     | ADVISOR   | 17845  | 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)<br>Service Code(s) | (c)<br>Relationship to employer, employee organization, or person known to be a party-in-interest | (d)<br>Enter direct compensation paid by the plan. If none, enter -0-. | (e)<br>Did service provider receive indirect compensation? (sources other than plan or plan sponsor) | (f)<br>Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures? | (g)<br>Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-. | (h)<br>Did the service provider give you a formula instead of an amount or estimated amount? |
|------------------------|---|--|--|--|---|--|
| 15                     | RECORDKEEPER  | 11745  | 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)<br>Service Code(s) | (c)<br>Relationship to employer, employee organization, or person known to be a party-in-interest | (d)<br>Enter direct compensation paid by the plan. If none, enter -0-. | (e)<br>Did service provider receive indirect compensation? (sources other than plan or plan sponsor) | (f)<br>Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures? | (g)<br>Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-. | (h)<br>Did the service provider give you a formula instead of an amount or estimated amount? |
|------------------------|---|--|--|--|---|--|
|                        |   |  | Yes <input type="checkbox"/> No <input type="checkbox"/>   | Yes <input type="checkbox"/> No <input type="checkbox"/>   |   | Yes <input type="checkbox"/> No <input type="checkbox"/>                                     |

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

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

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

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

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

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

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

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

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

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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

|  |  |
|--|--|
| For calendar plan year 2024 or fiscal plan year beginning <b>01/01/2024</b> and ending <b>12/31/2024</b> |  |
| <b>A</b> Name of plan<br><b>JME INC 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<br><b>JME INC</b>                          | <b>D</b> Employer Identification Number (EIN)<br><b>95-4536494</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.

|  |                 | (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>    | 226326                | 271920          |
| <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>    | 94876                 | 112392          |
| <b>(9)</b> Value of interest in common/collective trusts .....                                     | <b>1c(9)</b>    | 0                     | 0               |
| <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>   | 5176378               | 5859330         |
| <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>    | 5497580               | 6243642         |
| <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>    | 5497580               | 6243642         |

**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> | 0          |           |
| <b>(B)</b> Participants.....   | <b>2a(1)(B)</b> | 263841     |           |
| <b>(C)</b> Others (including rollovers).....   | <b>2a(1)(C)</b> | 0          |           |
| (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>    |            | 263841    |
| <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> | 11621      |           |
| <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> | 8215       |           |
| <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> |            | 19836     |
| <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> | 239267     |           |
| <b>(D)</b> Total dividends. Add lines <b>2b(2)(A)</b> , <b>(B)</b> , and <b>(C)</b> .....                  | <b>2b(2)(D)</b> |            | 239267    |
| <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> |            | 437949    |
| <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>     |            | 960893    |

**Expenses**

|  |               |        |        |
|--|---------------|--------|--------|
| <b>e</b> Benefit payment and payments to provide benefits:                                 |               |        |        |
| (1) Directly to participants or beneficiaries, including direct rollovers.....             | <b>2e(1)</b>  | 145166 |        |
| (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>  |        | 145166 |
| <b>f</b> Corrective distributions (see instructions) .....                                 | <b>2f</b>     |        | 39475  |
| <b>g</b> Certain deemed distributions of participant loans (see instructions).....         | <b>2g</b>     |        | 0      |
| <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>  | 11485  |        |
| (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>  | 17845  |        |
| (6) Bank or trust company trustee/custodial fees .....                                     | <b>2i(6)</b>  | 860    |        |
| (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> |        | 30190  |
| <b>j</b> Total expenses. Add all <b>expense</b> amounts in column (b) and enter total..... | <b>2j</b>     |        | 214831 |

**Net Income and Reconciliation**

|   |              |  |        |
|---|--------------|--|--------|
| <b>k</b> Net income (loss). Subtract line <b>2j</b> from line <b>2d</b> ..... | <b>2k</b>    |  | 746062 |
| <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:

(2) EIN:

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

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

|   |  |            |
|---|--|------------|
| <b>A</b> Name of plan<br><u>JME INC 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<br><u>JME INC</u> | <b>D</b> Employer Identification Number (EIN)<br><u>95-4536494</u> |            |

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

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

|  |   |  |
|--|---|--|
| <b>1</b> Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....  | 1 |  |
| <b>2</b> Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits):<br>EIN(s): <u>27-3169253</u> |   |  |
| <b>Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.</b>  |   |  |
| <b>3</b> Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year .....   | 3 |  |

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

|   |                              |  |                              |
|---|------------------------------|--|------------------------------|
| <b>4</b> Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? .....  | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No | <input type="checkbox"/> N/A |
| <b>If the plan is a defined benefit plan, go to line 8.</b>   |                              |  |                              |
| <b>5</b> If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. <b>Date:</b> Month _____ Day _____ Year _____<br><b>If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.</b> |                              |  |                              |
| <b>6 a</b> Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived) .....  | 6a                           |  |                              |
| <b>b</b> Enter the amount contributed by the employer to the plan for this plan year .....  | 6b                           |  |                              |
| <b>c</b> Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount).....   | 6c                           |  |                              |
| <b>If you completed line 6c, skip lines 8 and 9.</b>  |                              |  |                              |
| <b>7</b> Will the minimum funding amount reported on line 6c be met by the funding deadline?.....   | <input type="checkbox"/> Yes | <input type="checkbox"/> No            | <input type="checkbox"/> N/A |
| <b>8</b> If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change? .....   | <input type="checkbox"/> Yes | <input type="checkbox"/> No            | <input type="checkbox"/> N/A |

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

|  |                                   |                                   |                               |                             |
|--|-----------------------------------|-----------------------------------|-------------------------------|-----------------------------|
| <b>9</b> If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box. If no, check the "No" box..... | <input type="checkbox"/> Increase | <input type="checkbox"/> Decrease | <input type="checkbox"/> Both | <input type="checkbox"/> No |
|--|-----------------------------------|-----------------------------------|-------------------------------|-----------------------------|

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

|  |                              |  |
|--|------------------------------|--|
| <b>10</b> Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan? .....  | <input type="checkbox"/> Yes | <input type="checkbox"/> No            |
| <b>11 a</b> Does the ESOP hold any preferred stock? .....  | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| <b>b</b> If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.) ..... | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |
| <b>12</b> Does the ESOP hold any stock that is not readily tradable on an established securities market? .....   | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

**Part VII IRS Compliance Questions**

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

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

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

# JME Inc 401(k) Profit Sharing Plan & Trust

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Financial Statements

December 31, 2024 and 2023

# JME Inc 401(k) Profit Sharing Plan & Trust

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# STERLING ACCOUNTING & TAX SERVICES, INC.

21600 Oxnard Street, Ste 2000, Woodland Hills, CA 91367; Tel – (818)468-8408; email – [vbramha@sterlingtax.net](mailto:vbramha@sterlingtax.net); [www.sterlingtax.net](http://www.sterlingtax.net)

## Independent Auditor's Report

**To the Plan Administrator and Participants of the  
JME Inc 401(k) Profit Sharing Plan & Trust  
San Fernando, California**

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

We have performed audits of the accompanying financial statements of JME Inc 401(k) Profit Sharing Plan & Trust, an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), as permitted by ERISA Section 103(a)(3)(C) [ERISA Section 103(a)(3)(C) audit]. The financial statements comprise the statements of net assets available for benefits as of December 31, 2024 and 2023, and the related statement of changes in net assets available for benefits for the year ended December 31, 2024, and the related notes to the financial statements.

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

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

### Opinion

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

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

### Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Our responsibilities under those standards are further described in the Auditor's

Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of JME Inc 401(k) Profit Sharing Plan & Trust and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our ERISA Section 103(a)(3)(C) audit opinion.

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

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

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

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

### **Auditor's Responsibilities for the Audit of the Financial Statements**

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

In performing an audit in accordance with generally accepted auditing standards, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of JME Inc 401(k) Profit Sharing Plan & Trust'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 JME Inc 401(k) Profit Sharing Plan & Trust's ability to continue as a going concern for a reasonable period of time.

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

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

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

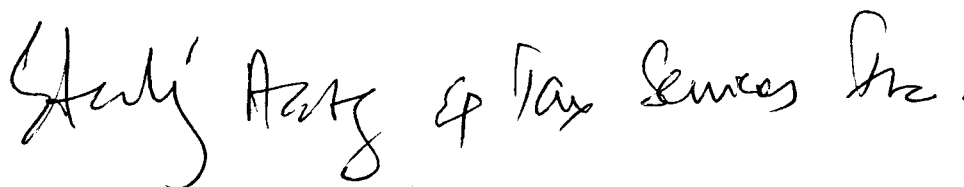
**Other Matter—Supplemental Schedules Required by ERISA**

The supplemental schedule of assets held at end of year (Schedule H, Line 4i) is presented for purposes of additional analysis and are not a required part of the financial statements but are supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedules, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with generally accepted auditing standards. For information included in the supplemental schedules that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

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

In our opinion—

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



Woodland Hills, California  
October 8, 2025

# JME Inc 401(k) Profit Sharing Plan & Trust

## Statements of Net Assets Available for Benefits

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### ASSETS

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| December 31,                        | 2024                | 2023                |
|-------------------------------------|---------------------|---------------------|
| Investments, at fair value          | \$ 6,131,250        | \$ 5,402,704        |
| Notes receivables from participants | 112,392             | 94,876              |
| <b>Total assets</b>                 | <b>\$ 6,243,642</b> | <b>\$ 5,497,580</b> |

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### LIABILITIES

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|  |                     |                     |
|--|---------------------|---------------------|
| Excess contributions payable             | \$ 53,583           | \$ 33,482           |
| <b>Total liabilities</b>                 | <b>\$ 53,583</b>    | <b>\$ 33,482</b>    |
| <b>Net assets available for benefits</b> | <b>\$ 6,190,059</b> | <b>\$ 5,464,098</b> |

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*The accompanying notes are an integral part of these financial statements.*

# JME Inc 401(k) Profit Sharing Plan & Trust

## Statement of Changes in Net Assets Available for Benefits

| Year ended December 31,   | 2024                |
|---|---------------------|
| <b>Additions to net assets:</b>                                     |                     |
| Interest on participant loans                                       | \$ 8,215            |
| Interest and dividends  | 250,888             |
| Net appreciation on the fair value of investments                   | 437,949             |
| Participant contributions, including rollovers                      | 263,841             |
| <b>Total additions to net assets</b>                                | <b>960,893</b>      |
| <b>Deductions from net assets:</b>                                  |                     |
| Benefits paid to participants                                       | 145,166             |
| Corrective distributions  | 59,576              |
| Administration fee  | 30,190              |
| <b>Total deductions from net assets</b>                             | <b>234,932</b>      |
| <b>Net increase (decrease) in net assets available for benefits</b> | <b>725,961</b>      |
| <b>Net assets available for benefits, beginning of year</b>         | <b>5,464,098</b>    |
| <b>Net assets available for benefits, end of year</b>               | <b>\$ 6,190,059</b> |

*The accompanying notes are an integral part of these financial statements.*

# JME Inc 401(k) Profit Sharing Plan & Trust

## Notes to Financial Statements

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### Description of plan:

**General:** JME Inc (the “Company”) is the sponsor of the JME Inc 401(k) Profit Sharing Plan & Trust (the Plan), a defined contribution retirement plan covering substantially all employees of the Company who must be at least age 21 years and have completed three months of service with the Company. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA). Participants should refer to the Plan document for a more complete description of the Plan’s provisions.

**Plan Administration:** The Plan is administered by certain officers of the Company. The Company contracted with Mid Atlantic Trust Company to act as the trustee. PAYCHEX Retirement Services acts as the third-party administrator. Substantially all expenses incurred for administering the Plan are paid by the Company.

**Contributions:** Each year, participants in the Plan may contribute up to 100% of their pre-tax annual compensation, subject to limitations under the Internal Revenue Code. Participants who will be at least 50 years of age by the end of the plan year may make an additional “catch-up” contribution of up to \$7,500. Participants may also contribute amounts distributed from other qualified plans (rollover contributions). Each year the Company may make a discretionary contribution to the Plan allocated to eligible participants based on a ratio of participant’s annual compensation to total compensation. The Company has not made any contributions for the years ended December 31, 2024 and 2023.

**Participant accounts and Investment Options:** Participant accounts are all self-directed and each participant’s account is credited with the participant’s contributions and allocations of the Company’s contributions, if any, and plan earnings. Each account is also charged with an allocation of administrative expenses not paid for by the Company. Investments in the Plan are self-directed by each Plan participant.

The Plan includes terminated participants whose balances totaled approximately, \$1,266,277 and \$982,764 as of December 31, 2024 and 2023, respectively.

**Notes receivable from participants:** Participants may borrow from the Plan a minimum of \$1,000 up to a maximum equal to the lesser of (i) 95% of one-half of the participant’s vested account, reduced by any outstanding loan balance or (ii) \$50,000, reduced by the highest outstanding loan balance during the one-year period ending on the day before the loan is made. Loan terms range from one to 4.5 years and for the loans taken for the purchase of a primary residence can be repaid over a longer period. The loans are secured by the participant’s account and bear interest at prime plus 1%. Participants may have a maximum of two loans outstanding at any given time. Generally, principal and interest are paid ratably through payroll deductions. Interest income on notes receivable from the participants was \$ 8,215 for the year ended December 31, 2024.

# JME Inc 401(k) Profit Sharing Plan & Trust

## Notes to Financial Statements (continued)

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### Description of plan (continued):

**Vesting:** Participants are immediately 100% vested in the contributions plus earnings thereon. The Company's discretionary contributions are subject to a vesting schedule. Vesting is based on the years of continuous service as follows:

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| Years of service | Percentage |
|------------------|------------|
| Less than 2      | 0%         |
| 2                | 25%        |
| 3                | 50%        |
| 4                | 75%        |
| 5 or more        | 100%       |

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**Payment of benefits:** Distributions of benefits from the Plan to a participant, or his/her heirs are allowed in the case of death, disability, retirement, or termination of employment with the Company. Upon termination, a participant may elect to have their balances distributed in lump sum or installments if a participant's vested interest exceeds \$5,000. If the participant's vested interest is less than \$5,000 the benefit must be distributed in a single lump-sum payment as soon as possible following the event that entitles the participant to a distribution.

**Plan expenses:** Certain administrative costs and fees are paid by the Company. However, the Plan permits the payment of Plan expenses using the Plan assets. When expenses are paid using the Plan's assets, the expenses are allocated among the accounts of all participants of the Plan. Total administrative expenses paid using the Plan assets during the years ended December 31, 2024 and 2023 totaled \$30,190 and \$26,601 respectively.

### Summary of significant accounting policies:

**Basis of accounting:** The Plan's financial statements are prepared using the accrual method of accounting. Benefits are recorded when paid.

**Use of estimates:** The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities, and changes therein, and disclosure of contingent assets and liabilities. Actual results could differ from those estimates

**Plan termination:** Although it has not expressed any intent to do so, the Company has the right under the Plan to terminate the Plan subject to the provisions of ERISA. In the event of Plan termination, participants would become 100% vested in their accounts.

# JME Inc 401(k) Profit Sharing Plan & Trust

## Notes to Financial Statements (continued)

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### Summary of significant accounting policies: (continued):

#### Tax status:

The Company adopted a standardized prototype plan, which obtained a updated determination letter dated August 31, 2020 which stated that the Plan, as designed, was in accordance with applicable sections of the Internal Revenue Code (IRC) based on July 2015 submission for approval. However, the Plan has been amended again in June 2022. However, the plan administrator believes that the Plan is currently designed and being operated in compliance with the applicable requirements of the Internal Revenue Code and therefore no provision for income taxes is included.

Disclosure or accrual of uncertain tax positions is not required when it is more likely than not that the plan is entitled to the economic benefits resulting from the positions taken in income tax returns. The plan has no uncertain tax positions that qualify for either recognition or disclosure in the financial statements.

#### Investment valuation and income recognition:

All investments are in mutual funds and money market accounts. The fair values for mutual funds and money market accounts are based on quoted price in active markets and are therefore classified within Level 1 of the fair value hierarchy. Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Net appreciation includes the Plan's gains and losses on investments bought and sold as well as held during the year.

#### Fair value measurements:

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

#### Level 1:

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

#### Level 2:

Inputs to the valuation methodology include

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

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

# JME Inc 401(k) Profit Sharing Plan & Trust

## Notes to Financial Statements (continued)

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

*Common stocks, corporate bonds and U.S. government securities:* Valued at the closing price reported on the active market on which the individual securities are traded.

*Mutual funds:* Valued at the net asset value (NAV) of shares held by the plan at year end.

*Common collective trusts:* Valued at NAV of units held by the Plan at the year end.

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

**Fair value of investments:** The following tables set forth by level, within the fair value hierarchy, the plan's assets at fair value as of:

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| December 31, 2024               | Level 1      | Level 2 | Level 3 | Total        |
|---------------------------------|--------------|---------|---------|--------------|
| Cash equivalents                | \$ 271,920   | \$ -    | \$ -    | \$ 271,920   |
| Mutual funds                    | 5,859,330    | -       | -       | 5,859,330    |
| Total fair value of investments | \$ 6,131,250 | \$ -    | \$ -    | \$ 6,131,250 |

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# JME Inc 401(k) Profit Sharing Plan & Trust

## Notes to Financial Statements (continued)

**Fair value measurements (continued):**

| December 31, 2023                      | Level 1             | Level 2     | Level 3     | Total               |
|--|---------------------|-------------|-------------|---------------------|
| Cash equivalents                       | \$ -                | \$ -        | \$ -        | \$ -                |
| Mutual funds                           | 5,402,704           | -           | -           | 5,402,704           |
| <b>Total fair value of Investments</b> | <b>\$ 5,402,704</b> | <b>\$ -</b> | <b>\$ -</b> | <b>\$ 5,402,704</b> |

**Information certified as complete and accurate by custodian**

The Plan administrator has elected the method of annual reporting permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, the Plan's Investment trustee has certified that the following information in the accompanying financial statements and supplemental schedule is complete and accurate:

**(unaudited):**

- Investments, as shown in the Statements of Net Assets Available for Benefits as of December 31, 2024 and 2023, except for Notes receivable from participants of \$112,392 and \$94,876 respectively as of December 31, 2024 and 2023 respectively.
- Investment income, as shown in the Statement of Changes in Net Assets Available for Benefits for the year ended December 31, 2024 except for participant loans interest of \$8,215
- Schedule H, Line 4i – Schedule of Assets (Held at End of Year) as of December 31, 2024, except participant loans of \$112,392.

**Related-Party transactions:**

The Plan has loans with its participants and are considered parties-in-interest under ERISA. In addition, the Company paid \$900 on behalf of the Plan towards its record keeping to the Plan's third-party administrator. All of these transactions are considered exempt party-in-interest transactions under ERISA.

**Excess contribution payable:**

The Plan was not in compliance with the Actual Deferral Percentage test for the plan year ended December 31, 2024 and 2023. The Plan administrator corrected these deficiencies in the respective following years by distributing the excess contributions, along with an income allocation based on the earnings rate under the Plan as a whole, in order for the Plan to pass the ADP test in all those years.

# JME Inc 401(k) Profit Sharing Plan & Trust

## Notes to Financial Statements (continued)

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

**Reconciliation of financial statements to Form 5500:** The following is a reconciliation of net assets available for plan benefits according to the financial statements to Form 5500 for the years ended December 31:

|   | 2024         | 2023         |
|---|--------------|--------------|
| Net Assets Available for Plan Benefits per F/S        | \$ 6,190,059 | \$ 5,464,098 |
| Excess contribution payable                           | 53,583       | 33,482       |
| Net Assets Available for Plan Benefits per Form 5500  | \$ 6,243,642 | \$ 5,497,580 |
| Year ended December 31,                               | 2024         |              |
| Deductions to Net Assets per the financial statements | \$ 234,932   |              |
| Excess contributions payable, beginning               | 33,482       |              |
| Excess contribution payable, end                      | (53,582)     |              |
| Deductions to Net Assets per Form 5500                | \$ 214,831   |              |

**Forfeiture:** If the participant terminates service and elects to receive the value of participant's vested account balance, the non-vested portion shall be treated as forfeiture. The Plan administrator allocates such forfeiture in the same manner as a contribution by the Company in the year. The non-vested amount to be forfeited in later years as of December 31, 2024 was \$18,265.

**Subsequent events:** The Plan evaluates events and transactions occurring subsequent to the date of the financial statements for matters requiring recognition or disclosure in the financial statements. The accompanying financial statements consider events through October 8, 2025, which is the date the financial statements were available for release.

## **Supplemental Information**

**JME Inc 401(k) Profit Sharing Plan & Trust**  
**EIN/Plan No.: 95-4536494/001**  
**Schedule H, line 4i - Schedule of Assets (Held at End of Year)**  
**Plan Year Ending 12/31/2024**

| (a)               | (b)<br>Identity of issuer | (c)<br>Description of investment                             | (d)<br>Cost | (e)           |
|-------------------|---------------------------|--|-------------|---------------|
|                   |                           |  |             | Current Value |
|                   | Fidelity Investments      | Fidelity Government Money Market                             | **          | \$ 271,920    |
|                   | Invesco                   | Value Opportunities Fund Class A                             | **          | 406,965       |
|                   | Baron Capital             | Baron Asset Fund Retail Class                                | **          | 60,369        |
|                   | BlackRock Capital         | BlackRock Technology Opportunities Fund Institutional Shares | **          | 60,879        |
|                   | Columbia Capital          | Columbia Contrarian Core Fund Institutional 3 Class          | **          | 9             |
|                   | Fidelity Investments      | Fidelity Extended Market Index                               | **          | 311,936       |
|                   | Fidelity Investments      | Fidelity 500 Index   | **          | 1,156,348     |
|                   | Fidelity Investments      | Fidelity Value   | **          | 625,248       |
|                   | Nuveen                    | Large Cap Value Index Fund R6 Class                          | **          | 126,084       |
|                   | Vanguard                  | Vanguard Small-Cap Growth Index Fund Admiral Shares          | **          | 770,132       |
|                   | iShares Capital           | iShares MSCI Total International Index Fund Class K          | **          | 192,184       |
|                   | Fidelity Investments      | Fidelity International Index                                 | **          | 210,290       |
|                   | Fidelity Investments      | Fidelity Total Bond Fund                                     | **          | 1,043,042     |
|                   | Fidelity Investments      | Fidelity Freedom 2040  | **          | 207,347       |
|                   | Fidelity Investments      | Fidelity Freedom 2050  | **          | 62,129        |
|                   | Fidelity Investments      | Fidelity Freedom 2045  | **          | 33,665        |
|                   | Fidelity Investments      | Fidelity Freedom 2035  | **          | 20,064        |
|                   | Fidelity Investments      | Fidelity Freedom 2025  | **          | 82,518        |
|                   | Fidelity Investments      | Fidelity Freedom 2060  | **          | 6,511         |
|                   | Fidelity Investments      | Fidelity Freedom 2055  | **          | 13,758        |
|                   | Fidelity Investments      | Fidelity Freedom 2065  | **          | 934           |
|                   | Fidelity Investments      | Fidelity Freedom Income                                      | **          | 437,949       |
|                   | Fidelity Investments      | Fidelity Freedom 2030  | **          | 30,969        |
|                   |                           |  | **          |               |
| Total Investments |                           |  |             | \$ 6,131,250  |

\*\* Cost information is omitted because transactions in the Plan are participant directed

# JME Inc 401(k) Profit Sharing Plan & Trust

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Financial Statements

December 31, 2024 and 2023

# JME Inc 401(k) Profit Sharing Plan & Trust

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# STERLING ACCOUNTING & TAX SERVICES, INC.

21600 Oxnard Street, Ste 2000, Woodland Hills, CA 91367; Tel – (818)468-8408; email – [vbramha@sterlingtax.net](mailto:vbramha@sterlingtax.net); [www.sterlingtax.net](http://www.sterlingtax.net)

## Independent Auditor's Report

**To the Plan Administrator and Participants of the  
JME Inc 401(k) Profit Sharing Plan & Trust  
San Fernando, California**

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

We have performed audits of the accompanying financial statements of JME Inc 401(k) Profit Sharing Plan & Trust, an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), as permitted by ERISA Section 103(a)(3)(C) [ERISA Section 103(a)(3)(C) audit]. The financial statements comprise the statements of net assets available for benefits as of December 31, 2024 and 2023, and the related statement of changes in net assets available for benefits for the year ended December 31, 2024, and the related notes to the financial statements.

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

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

### Opinion

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

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

### Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Our responsibilities under those standards are further described in the Auditor's

Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of JME Inc 401(k) Profit Sharing Plan & Trust and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our ERISA Section 103(a)(3)(C) audit opinion.

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

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

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

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

### **Auditor's Responsibilities for the Audit of the Financial Statements**

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

In performing an audit in accordance with generally accepted auditing standards, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of JME Inc 401(k) Profit Sharing Plan & Trust'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 JME Inc 401(k) Profit Sharing Plan & Trust's ability to continue as a going concern for a reasonable period of time.

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

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

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

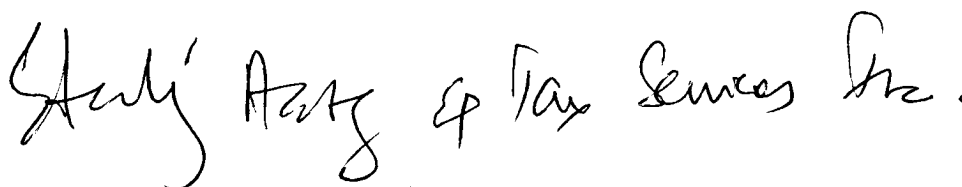
**Other Matter—Supplemental Schedules Required by ERISA**

The supplemental schedule of assets held at end of year (Schedule H, Line 4i) is presented for purposes of additional analysis and are not a required part of the financial statements but are supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedules, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with generally accepted auditing standards. For information included in the supplemental schedules that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

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

In our opinion—

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



Woodland Hills, California  
October 8, 2025

# JME Inc 401(k) Profit Sharing Plan & Trust

## Statements of Net Assets Available for Benefits

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### ASSETS

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| December 31,                        | 2024                | 2023                |
|-------------------------------------|---------------------|---------------------|
| Investments, at fair value          | \$ 6,131,250        | \$ 5,402,704        |
| Notes receivables from participants | 112,392             | 94,876              |
| <b>Total assets</b>                 | <b>\$ 6,243,642</b> | <b>\$ 5,497,580</b> |

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### LIABILITIES

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|  |                     |                     |
|--|---------------------|---------------------|
| Excess contributions payable             | \$ 53,583           | \$ 33,482           |
| <b>Total liabilities</b>                 | <b>\$ 53,583</b>    | <b>\$ 33,482</b>    |
| <b>Net assets available for benefits</b> | <b>\$ 6,190,059</b> | <b>\$ 5,464,098</b> |

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*The accompanying notes are an integral part of these financial statements.*

# JME Inc 401(k) Profit Sharing Plan & Trust

## Statement of Changes in Net Assets Available for Benefits

| Year ended December 31,                                      | 2024         |
|--|--------------|
| <hr/>  |              |
| Additions to net assets:                                     |              |
| Interest on participant loans                                | \$ 8,215     |
| Interest and dividends                                       | 250,888      |
| Net appreciation on the fair value of investments            | 437,949      |
| Participant contributions, including rollovers               | 263,841      |
| <hr/>  |              |
| Total additions to net assets                                | 960,893      |
| <hr/>  |              |
| Deductions from net assets:                                  |              |
| Benefits paid to participants                                | 145,166      |
| Corrective distributions                                     | 59,576       |
| Administration fee   | 30,190       |
| <hr/>  |              |
| Total deductions from net assets                             | 234,932      |
| <hr/>  |              |
| Net increase (decrease) in net assets available for benefits | 725,961      |
| Net assets available for benefits, beginning of year         | 5,464,098    |
| <hr/>  |              |
| Net assets available for benefits, end of year               | \$ 6,190,059 |

*The accompanying notes are an integral part of these financial statements.*

# JME Inc 401(k) Profit Sharing Plan & Trust

## Notes to Financial Statements

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### Description of plan:

**General:** JME Inc (the "Company") is the sponsor of the JME Inc 401(k) Profit Sharing Plan & Trust (the Plan), a defined contribution retirement plan covering substantially all employees of the Company who must be at least age 21 years and have completed three months of service with the Company. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA). Participants should refer to the Plan document for a more complete description of the Plan's provisions.

**Plan Administration:** The Plan is administered by certain officers of the Company. The Company contracted with Mid Atlantic Trust Company to act as the trustee. PAYCHEX Retirement Services acts as the third-party administrator. Substantially all expenses incurred for administering the Plan are paid by the Company.

**Contributions:** Each year, participants in the Plan may contribute up to 100% of their pre-tax annual compensation, subject to limitations under the Internal Revenue Code. Participants who will be at least 50 years of age by the end of the plan year may make an additional "catch-up" contribution of up to \$7,500. Participants may also contribute amounts distributed from other qualified plans (rollover contributions). Each year the Company may make a discretionary contribution to the Plan allocated to eligible participants based on a ratio of participant's annual compensation to total compensation. The Company has not made any contributions for the years ended December 31, 2024 and 2023.

**Participant accounts and Investment Options:** Participant accounts are all self-directed and each participant's account is credited with the participant's contributions and allocations of the Company's contributions, if any, and plan earnings. Each account is also charged with an allocation of administrative expenses not paid for by the Company. Investments in the Plan are self-directed by each Plan participant.

The Plan includes terminated participants whose balances totaled approximately, \$1,266,277 and \$982,764 as of December 31, 2024 and 2023, respectively.

**Notes receivable from participants:** Participants may borrow from the Plan a minimum of \$1,000 up to a maximum equal to the lesser of (i) 95% of one-half of the participant's vested account, reduced by any outstanding loan balance or (ii) \$50,000, reduced by the highest outstanding loan balance during the one-year period ending on the day before the loan is made. Loan terms range from one to 4.5 years and for the loans taken for the purchase of a primary residence can be repaid over a longer period. The loans are secured by the participant's account and bear interest at prime plus 1%. Participants may have a maximum of two loans outstanding at any given time. Generally, principal and interest are paid ratably through payroll deductions. Interest income on notes receivable from the participants was \$ 8,215 for the year ended December 31, 2024.

# JME Inc 401(k) Profit Sharing Plan & Trust

## Notes to Financial Statements (continued)

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### Description of plan (continued):

**Vesting:** Participants are immediately 100% vested in the contributions plus earnings thereon. The Company's discretionary contributions are subject to a vesting schedule. Vesting is based on the years of continuous service as follows:

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| Years of service | Percentage |
|------------------|------------|
| Less than 2      | 0%         |
| 2                | 25%        |
| 3                | 50%        |
| 4                | 75%        |
| 5 or more        | 100%       |

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**Payment of benefits:** Distributions of benefits from the Plan to a participant, or his/her heirs are allowed in the case of death, disability, retirement, or termination of employment with the Company. Upon termination, a participant may elect to have their balances distributed in lump sum or installments if a participant's vested interest exceeds \$5,000. If the participant's vested interest is less than \$5,000 the benefit must be distributed in a single lump-sum payment as soon as possible following the event that entitles the participant to a distribution.

**Plan expenses:** Certain administrative costs and fees are paid by the Company. However, the Plan permits the payment of Plan expenses using the Plan assets. When expenses are paid using the Plan's assets, the expenses are allocated among the accounts of all participants of the Plan. Total administrative expenses paid using the Plan assets during the years ended December 31, 2024 and 2023 totaled \$30,190 and \$26,601 respectively.

### Summary of significant accounting policies:

**Basis of accounting:** The Plan's financial statements are prepared using the accrual method of accounting. Benefits are recorded when paid.

**Use of estimates:** The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities, and changes therein, and disclosure of contingent assets and liabilities. Actual results could differ from those estimates

**Plan termination:** Although it has not expressed any intent to do so, the Company has the right under the Plan to terminate the Plan subject to the provisions of ERISA. In the event of Plan termination, participants would become 100% vested in their accounts.

# JME Inc 401(k) Profit Sharing Plan & Trust

## Notes to Financial Statements (continued)

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### Summary of significant accounting policies: (continued):

#### Tax status:

The Company adopted a standardized prototype plan, which obtained a updated determination letter dated August 31, 2020 which stated that the Plan, as designed, was in accordance with applicable sections of the Internal Revenue Code (IRC) based on July 2015 submission for approval. However, the Plan has been amended again in June 2022. However, the plan administrator believes that the Plan is currently designed and being operated in compliance with the applicable requirements of the Internal Revenue Code and therefore no provision for income taxes is included.

Disclosure or accrual of uncertain tax positions is not required when it is more likely than not that the plan is entitled to the economic benefits resulting from the positions taken in income tax returns. The plan has no uncertain tax positions that qualify for either recognition or disclosure in the financial statements.

#### Investment valuation and income recognition:

All investments are in mutual funds and money market accounts. The fair values for mutual funds and money market accounts are based on quoted price in active markets and are therefore classified within Level 1 of the fair value hierarchy. Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Net appreciation includes the Plan's gains and losses on investments bought and sold as well as held during the year.

#### Fair value measurements:

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

#### Level 1:

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

#### Level 2:

Inputs to the valuation methodology include

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

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

# JME Inc 401(k) Profit Sharing Plan & Trust

## Notes to Financial Statements (continued)

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

*Common stocks, corporate bonds and U.S. government securities:* Valued at the closing price reported on the active market on which the individual securities are traded.

*Mutual funds:* Valued at the net asset value (NAV) of shares held by the plan at year end.

*Common collective trusts:* Valued at NAV of units held by the Plan at the year end.

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

**Fair value of investments:** The following tables set forth by level, within the fair value hierarchy, the plan's assets at fair value as of:

| December 31, 2024                      | Level 1             | Level 2     | Level 3     | Total               |
|--|---------------------|-------------|-------------|---------------------|
| Cash equivalents                       | \$ 271,920          | \$ -        | \$ -        | \$ 271,920          |
| Mutual funds                           | 5,859,330           | -           | -           | 5,859,330           |
| <b>Total fair value of investments</b> | <b>\$ 6,131,250</b> | <b>\$ -</b> | <b>\$ -</b> | <b>\$ 6,131,250</b> |

# JME Inc 401(k) Profit Sharing Plan & Trust

## Notes to Financial Statements (continued)

**Fair value measurements (continued):**

| December 31, 2023                      | Level 1             | Level 2     | Level 3     | Total               |
|--|---------------------|-------------|-------------|---------------------|
| Cash equivalents                       | \$ -                | \$ -        | \$ -        | \$ -                |
| Mutual funds                           | 5,402,704           | -           | -           | 5,402,704           |
| <b>Total fair value of Investments</b> | <b>\$ 5,402,704</b> | <b>\$ -</b> | <b>\$ -</b> | <b>\$ 5,402,704</b> |

**Information certified as complete and accurate by custodian**

The Plan administrator has elected the method of annual reporting permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, the Plan's Investment trustee has certified that the following information in the accompanying financial statements and supplemental schedule is complete and accurate:

**(unaudited):**

- Investments, as shown in the Statements of Net Assets Available for Benefits as of December 31, 2024 and 2023, except for Notes receivable from participants of \$112,392 and \$94,876 respectively as of December 31, 2024 and 2023 respectively.
- Investment income, as shown in the Statement of Changes in Net Assets Available for Benefits for the year ended December 31, 2024 except for participant loans interest of \$8,215
- Schedule H, Line 4i – Schedule of Assets (Held at End of Year) as of December 31, 2024, except participant loans of \$112,392.

**Related-Party transactions:**

The Plan has loans with its participants and are considered parties-in-interest under ERISA. In addition, the Company paid \$900 on behalf of the Plan towards its record keeping to the Plan's third-party administrator. All of these transactions are considered exempt party-in-interest transactions under ERISA.

**Excess contribution payable:**

The Plan was not in compliance with the Actual Deferral Percentage test for the plan year ended December 31, 2024 and 2023. The Plan administrator corrected these deficiencies in the respective following years by distributing the excess contributions, along with an income allocation based on the earnings rate under the Plan as a whole, in order for the Plan to pass the ADP test in all those years.

# JME Inc 401(k) Profit Sharing Plan & Trust

## Notes to Financial Statements (continued)

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

**Reconciliation of financial statements to Form 5500:** The following is a reconciliation of net assets available for plan benefits according to the financial statements to Form 5500 for the years ended December 31:

|  | 2024         | 2023         |
|--|--------------|--------------|
| Net Assets Available for Plan Benefits per F/S       | \$ 6,190,059 | \$ 5,464,098 |
| Excess contribution payable                          | 53,583       | 33,482       |
| Net Assets Available for Plan Benefits per Form 5500 | \$ 6,243,642 | \$ 5,497,580 |

| Year ended December 31,                               | 2024       |
|---|------------|
| Deductions to Net Assets per the financial statements | \$ 234,932 |
| Excess contributions payable, beginning               | 33,482     |
| Excess contribution payable, end                      | (53,582)   |
| Deductions to Net Assets per Form 5500                | \$ 214,831 |

**Forfeiture:** If the participant terminates service and elects to receive the value of participant's vested account balance, the non-vested portion shall be treated as forfeiture. The Plan administrator allocates such forfeiture in the same manner as a contribution by the Company in the year. The non-vested amount to be forfeited in later years as of December 31, 2024 was \$18,265.

**Subsequent events:** The Plan evaluates events and transactions occurring subsequent to the date of the financial statements for matters requiring recognition or disclosure in the financial statements. The accompanying financial statements consider events through October 8, 2025, which is the date the financial statements were available for release.

## **Supplemental Information**

**JME Inc 401(k) Profit Sharing Plan & Trust**  
**EIN/Plan No.: 95-4536494/001**  
**Schedule H, line 4i - Schedule of Assets (Held at End of Year)**  
**Plan Year Ending 12/31/2024**

| (a)               | (b)<br>Identity of issuer | (c)<br>Description of investment                             | (d)<br>Cost | (e)           |
|-------------------|---------------------------|--|-------------|---------------|
|                   |                           |  |             | Current Value |
|                   | Fidelity Investments      | Fidelity Government Money Market                             | **          | \$ 271,920    |
|                   | Invesco                   | Value Opportunities Fund Class A                             | **          | 406,965       |
|                   | Baron Capital             | Baron Asset Fund Retail Class                                | **          | 60,369        |
|                   | BlackRock Capital         | BlackRock Technology Opportunities Fund Institutional Shares | **          | 60,879        |
|                   | Columbia Capital          | Columbia Contrarian Core Fund Institutional 3 Class          | **          | 9             |
|                   | Fidelity Investments      | Fidelity Extended Market Index                               | **          | 311,936       |
|                   | Fidelity Investments      | Fidelity 500 Index   | **          | 1,156,348     |
|                   | Fidelity Investments      | Fidelity Value   | **          | 625,248       |
|                   | Nuveen                    | Large Cap Value Index Fund R6 Class                          | **          | 126,084       |
|                   | Vanguard                  | Vanguard Small-Cap Growth Index Fund Admiral Shares          | **          | 770,132       |
|                   | iShares Capital           | iShares MSCI Total International Index Fund Class K          | **          | 192,184       |
|                   | Fidelity Investments      | Fidelity International Index                                 | **          | 210,290       |
|                   | Fidelity Investments      | Fidelity Total Bond Fund                                     | **          | 1,043,042     |
|                   | Fidelity Investments      | Fidelity Freedom 2040  | **          | 207,347       |
|                   | Fidelity Investments      | Fidelity Freedom 2050  | **          | 62,129        |
|                   | Fidelity Investments      | Fidelity Freedom 2045  | **          | 33,665        |
|                   | Fidelity Investments      | Fidelity Freedom 2035  | **          | 20,064        |
|                   | Fidelity Investments      | Fidelity Freedom 2025  | **          | 82,518        |
|                   | Fidelity Investments      | Fidelity Freedom 2060  | **          | 6,511         |
|                   | Fidelity Investments      | Fidelity Freedom 2055  | **          | 13,758        |
|                   | Fidelity Investments      | Fidelity Freedom 2065  | **          | 934           |
|                   | Fidelity Investments      | Fidelity Freedom Income                                      | **          | 437,949       |
|                   | Fidelity Investments      | Fidelity Freedom 2030  | **          | 30,969        |
|                   |                           |  | **          |               |
| Total Investments |                           |  | \$          | 6,131,250     |

\*\* Cost information is omitted because transactions in the Plan are participant directed