Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

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

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

OMB Nos. 1210-0110
1210-0089

2025

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2025 or fiscal plan year beginning 01/01/2022 and ending 12/31/2022

A This return/report is for:
- [ ] a multiemployer plan
- [ ] a multiple-employer plan (Filers checking this box must provide participating employer information in accordance with the form instructions.)
- [X] a single-employer plan
- [ ] a DFE (specify) ________

B This return/report is:
- [ ] the first return/report
- [ ] the final return/report
- [X] an amended return/report
- [ ] a short plan year return/report (less than 12 months)

C If the plan is a collectively-bargained plan, check here. . . . . ▶ [ ]

D Check box if filing under:
- [X] Form 5558
- [ ] automatic extension
- [ ] the DFVC program
- [ ] special extension (enter description)

E If this is a retroactively adopted plan permitted by SECURE Act section 201, check here. . . . . ▶ [ ]

Part II Basic Plan Information—enter all requested information

1a Name of plan
PCS SOFTWARE INC. 401(K) PROFIT SHARING PLAN AND TRUST

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan
01/01/2015

2a Plan sponsor's name (employer, if for a single-employer plan)
Mailing address (include room, apt., suite no. and street, or P.O. Box)
City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions)
PCS SOFTWARE INC.

2103 CITYWEST BLVD
BLDG 4, STE 700
HOUSTON, TX 77042

2b Employer Identification Number (EIN)
76-0690054

2c Plan Sponsor's telephone number
281-419-9500

2d Business code (see instructions)
541513

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.

SIGN HERE	Filed with authorized/valid electronic signature.	04/30/2026	JULIE CUNNINGHAM
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address [X] Same as Plan Sponsor	**3b** Administrator's EIN	
	3c Administrator's telephone number	
4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report:	**4b** EIN	
a Sponsor's name		
c Plan Name	**4d** PN	
5 Total number of participants at the beginning of the plan year	**5**	129
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines **6a(1), 6a(2), 6b, 6c,** and **6d**).		
a(1) Total number of active participants at the beginning of the plan year	**6a(1)**	87
a(2) Total number of active participants at the end of the plan year	**6a(2)**	88
b Retired or separated participants receiving benefits	**6b**	0
c Other retired or separated participants entitled to future benefits	**6c**	21
d Subtotal. Add lines **6a(2)**, **6b**, and **6c**.	**6d**	109
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	0
f Total. Add lines **6d** and **6e**.	**6f**	109
g(1) Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item)	**6g(1)**	
g(2) Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g(2)**	88
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	0
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristic Codes in the instructions:

2E 2F 2G 2J 2K 2R 2T 3D

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

9a Plan funding arrangement (check all that apply)	**9b** Plan benefit arrangement (check all that apply)
(1) [X] Insurance	(1) [X] Insurance
(2) [ ] Code section 412(e)(3) insurance contracts	(2) [ ] Code section 412(e)(3) insurance contracts
(3) [X] Trust	(3) [X] Trust
(4) [ ] General assets of the sponsor	(4) [ ] General assets of the sponsor

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

a Pension Schedules	**b General Schedules**
(1) [X] **R** (Retirement Plan Information)	(1) [X] **H** (Financial Information)
(2) [ ] **MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary	(2) [ ] **I** (Financial Information – Small Plan)
	(3) [X] **A** (Insurance Information) – Number Attached 1
	(4) [X] **C** (Service Provider Information)
(3) [ ] **SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary	(5) [X] **D** (DFE/Participating Plan Information)
(4) [ ] **DCG** (Individual Plan Information) – Number Attached ______	(6) [ ] **G** (Financial Transaction Schedules)
(5) [ ] **MEP** (Multiple-Employer Retirement Plan Information)	

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

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

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

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

11c Enter the Receipt Confirmation Code for the 2025 Form M-1 annual report. If the plan was not required to file the 2025 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code______________________

SCHEDULE A (Form 5500) Department of the Treasury Internal Revenue Service; Department of Labor Employee Benefits Security Administration; Pension Benefit Guaranty Corporation	**Insurance Information** This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ **File as an attachment to Form 5500.** ▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).	OMB No. 1210-0110 **2025** **This Form is Open to Public Inspection**

For calendar plan year 2025 or fiscal plan year beginning 01/01/2022 and ending 12/31/2022

A Name of plan
PCS SOFTWARE INC. 401(K) PROFIT SHARING PLAN AND TRUST

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
PCS SOFTWARE INC.

D Employer Identification Number (EIN)
76-0690054

Part I Information Concerning Insurance Contract Coverage, Fees, and Commissions

Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.

1 Coverage Information:

(a) Name of insurance carrier
LINCOLN NATIONAL LIFE INSURANCE COMPANY

(b) EIN	**(c)** NAIC code	**(d)** Contract or identification number	**(e)** Approximate number of persons covered at end of policy or contract year	Policy or contract year **(f)** From	Policy or contract year **(g)** To
35-0472300	65676	897141 087	7	06/20/2022	12/31/2022

2 Insurance fee and commission information. Enter the total fees and total commissions paid. List in line 3 the agents, brokers, and other persons in descending order of the amount paid.

(a) Total amount of commissions paid	**(b)** Total amount of fees paid

3 Persons receiving commissions and fees. (Complete as many entries as needed to report all persons).

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid **(c)** Amount	Fees and other commissions paid **(d)** Purpose	**(e)** Organization code

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid **(c)** Amount	Fees and other commissions paid **(d)** Purpose	**(e)** Organization code

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

Part II Investment and Annuity Contract Information

Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

4	Current value of plan's interest under this contract in the general account at year end	4	
5	Current value of plan's interest under this contract in separate accounts at year end	5	

6 Contracts With Allocated Funds:

a State the basis of premium rates ▶

b	Premiums paid to carrier	6b	
c	Premiums due but unpaid at the end of the year	6c	
d	If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount.	6d	

Specify nature of costs ▶

e Type of contract: (1) ☐ individual policies (2) ☐ group deferred annuity

(3) ☐ other (specify) ▶

f If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ▶ ☐

7 Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)

a Type of contract: (1) ☐ deposit administration (2) ☐ immediate participation guarantee

(3) ☒ guaranteed investment (4) ☐ other ▶

b	Balance at the end of the previous year			7b	
c	Additions: (1) Contributions deposited during the year	7c(1)	2739		
	(2) Dividends and credits	7c(2)	0		
	(3) Interest credited during the year	7c(3)	267		
	(4) Transferred from separate account	7c(4)			
	(5) Other (specify below)	7c(5)	30413		
	▶ OTHER INCOME				
	(6)Total additions			7c(6)	33419
d	Total of balance and additions (add lines **7b** and **7c(6)**).			7d	33419
e	Deductions:				
	(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)	0		
	(2) Administration charge made by carrier	7e(2)	74		
	(3) Transferred to separate account	7e(3)	0		
	(4) Other (specify below)	7e(4)	8026		
	▶ OTHER EXPENSES				
	(5) Total deductions			7e(5)	8100
f	Balance at the end of the current year (subtract line **7e(5)** from line **7d**)			7f	25319

Part III Welfare Benefit Contract Information

If more than one contract covers the same group of employees of the same employer(s) or members of the same employee organizations(s), the information may be combined for reporting purposes if such contracts are experience-rated as a unit. Where contracts cover individual employees, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

8 Benefit and contract type (check all applicable boxes)

a ☐ Health (other than dental or vision) **b** ☐ Dental **c** ☐ Vision **d** ☐ Life insurance
e ☐ Temporary disability (accident and sickness) **f** ☐ Long-term disability **g** ☐ Supplemental unemployment **h** ☐ Prescription drug
i ☐ Stop loss (large deductible) **j** ☐ HMO contract **k** ☐ PPO contract **l** ☐ Indemnity contract
m ☐ Other (specify) ▶

9 Experience-rated contracts:				
a Premiums: (1) Amount received	**9a(1)**			
(2) Increase (decrease) in amount due but unpaid	**9a(2)**			
(3) Increase (decrease) in unearned premium reserve	**9a(3)**			
(4) Earned (**(1)** + **(2)** - **(3)**)			**9a(4)**	0
b Benefit charges (1) Claims paid	**9b(1)**			
(2) Increase (decrease) in claim reserves	**9b(2)**			
(3) Incurred claims (add **(1)** and **(2)**)			**9b(3)**	0
(4) Claims charged			**9b(4)**	
c Remainder of premium: (1) Retention charges (on an accrual basis) --				
(A) Commissions	**9c(1)(A)**			
(B) Administrative service or other fees	**9c(1)(B)**			
(C) Other specific acquisition costs	**9c(1)(C)**			
(D) Other expenses	**9c(1)(D)**			
(E) Taxes	**9c(1)(E)**			
(F) Charges for risks or other contingencies	**9c(1)(F)**			
(G) Other retention charges	**9c(1)(G)**			
(H) Total retention			**9c(1)(H)**	0
(2) Dividends or retroactive rate refunds. (These amounts were ☐ paid in cash, or ☐ credited.)			**9c(2)**	0
d Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement			**9d(1)**	
(2) Claim reserves			**9d(2)**	
(3) Other reserves			**9d(3)**	
e Dividends or retroactive rate refunds due. (Do not include amount entered in line **9c(2)**.)			**9e**	
10 Nonexperience-rated contracts:				
a Total premiums or subscription charges paid to carrier			**10a**	
b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount.			**10b**	

Specify nature of costs.

Part IV Provision of Information

11 Did the insurance company fail to provide any information necessary to complete Schedule A? ☐ Yes ☒ No

12 If the answer to line 11 is "Yes," specify the information not provided. ▶

SCHEDULE C (Form 5500)	Service Provider Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ **File as an attachment to Form 5500.**	**2025** **This Form is Open to Public Inspection.**

For calendar plan year 2025 or fiscal plan year beginning 01/01/2022 and ending 12/31/2022

A Name of plan
PCS SOFTWARE INC. 401(K) PROFIT SHARING PLAN AND TRUST

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
PCS SOFTWARE INC.

D Employer Identification Number (EIN)
76-0690054

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).. . . . . [X] 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

FIDELITY INVESTMENTS INSTITUTIONAL

04-2647786

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

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

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

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

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

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

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

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

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

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

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

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

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

FIDELITY INVESTMENTS INSTITUTIONAL

04-2647786

(b) Service Code(s)	**(c)** Relationship to employer, employee organization, or person known to be a party-in-interest	**(d)** Enter direct compensation paid by the plan. If none, enter -0-.	**(e)** Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	**(f)** Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	**(g)** Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	**(h)** Did the service provider give you a formula instead of an amount or estimated amount?
37 64 65	RECORDKEEPER	4945	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [ ] No [X]

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

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

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

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

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

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

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

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

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

a Name: **b** EIN:
c Position:
d Address: **e** Telephone:

Explanation:

a Name: **b** EIN:
c Position:
d Address: **e** Telephone:

Explanation:

a Name: **b** EIN:
c Position:
d Address: **e** Telephone:

Explanation:

a Name: **b** EIN:
c Position:
d Address: **e** Telephone:

Explanation:

a Name: **b** EIN:
c Position:
d Address: **e** Telephone:

Explanation:

SCHEDULE D (Form 5500)	DFE/Participating Plan Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration	This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ **File as an attachment to Form 5500.**	**2025** **This Form is Open to Public Inspection.**

For calendar plan year 2025 or fiscal plan year beginning 01/01/2022 and ending 12/31/2022

A Name of plan PCS SOFTWARE INC. 401(K) PROFIT SHARING PLAN AND TRUST	**B** Three-digit plan number (PN) ▶ 001
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 PCS SOFTWARE INC.	**D** Employer Identification Number (EIN) 76-0690054

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

a Name of MTIA, CCT, PSA, or 103-12 IE: FLEXPATH MOD 2045 R1

b Name of sponsor of entity listed in (a): WILMINGTON TRUST FIDUCIARY SERVICES

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
47-2516187-220	C	198147

a Name of MTIA, CCT, PSA, or 103-12 IE: FLEXPATH MOD RET R1

b Name of sponsor of entity listed in (a): WILMINGTON TRUST FIDUCIARY SERVICES

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
47-2248665-211	C	41103

a Name of MTIA, CCT, PSA, or 103-12 IE: BLKRK R2000 IDX R

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

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
20-3802587-004	C	3764

a Name of MTIA, CCT, PSA, or 103-12 IE: WT EMERGING MKTS R1

b Name of sponsor of entity listed in (a): WILMINGTON TRUST, N.A

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
86-1819869-672	C	21844

a Name of MTIA, CCT, PSA, or 103-12 IE: SMALL CAP GR II R1

b Name of sponsor of entity listed in (a): WILMINGTON TRUST, N.A.

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
38-4126288-592	C	1924

a Name of MTIA, CCT, PSA, or 103-12 IE: PUTN LARGE CP VAL R1

b Name of sponsor of entity listed in (a): WILMINGTON TRUST, N.A.

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
38-4065329-426	C	36849

a Name of MTIA, CCT, PSA, or 103-12 IE: FLEXPATH MOD 2025 R1

b Name of sponsor of entity listed in (a): WILMINGTON TRUST FIDUCIARY SERVICES

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
47-2285799-214	C	228732

a Name of MTIA, CCT, PSA, or 103-12 IE: FLEXPATH MOD 2035 R1		
b Name of sponsor of entity listed in (a): WILMINGTON TRUST FIDUCIARY SERVICES		
c EIN-PN 47-2478524-217	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 512862

a Name of MTIA, CCT, PSA, or 103-12 IE: FLEXPATH MOD 2055 R1		
b Name of sponsor of entity listed in (a): WILMINGTON TRUST FIDUCIARY SERVICES		
c EIN-PN 47-2563528-223	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 597645

a Name of MTIA, CCT, PSA, or 103-12 IE: FLEXPATH MOD 2065 R1		
b Name of sponsor of entity listed in (a): WILMINGTON TRUST FIDUCIARY SERVICES		
c EIN-PN 38-7271379-760	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 19825

a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

Part II **Information on Participating Plans (to be completed by DFEs, other than DCGs)**
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

a Plan name

b Name of plan sponsor	**c** EIN-PN

SCHEDULE H (Form 5500)

Department of the Treasury
Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Financial Information

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

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

OMB No. 1210-0110

2025

This Form is Open to Public Inspection

For calendar plan year 2025 or fiscal plan year beginning 01/01/2022 and ending 12/31/2022

A Name of plan
PCS SOFTWARE INC. 401(K) PROFIT SHARING PLAN AND TRUST

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
PCS SOFTWARE INC.

D Employer Identification Number (EIN)
76-0690054

Part I Asset and Liability Statement

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

Assets		**(a)** Beginning of Year	**(b)** End of Year
a Total noninterest-bearing cash	**1a**	0	0
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	**1b(1)**	0	0
(2) Participant contributions	**1b(2)**	0	0
(3) Other	**1b(3)**	0	0
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	**1c(1)**	0	1690
(2) U.S. Government securities	**1c(2)**	0	0
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	**1c(3)(A)**	0	0
(B) All other	**1c(3)(B)**	0	0
(4) Corporate stocks (other than employer securities):			
(A) Preferred	**1c(4)(A)**	0	0
(B) Common	**1c(4)(B)**	0	0
(5) Partnership/joint venture interests	**1c(5)**	0	0
(6) Real estate (other than employer real property)	**1c(6)**	0	0
(7) Loans (other than to participants)	**1c(7)**	0	0
(8) Participant loans	**1c(8)**	3343	27982
(9) Value of interest in common/collective trusts	**1c(9)**	0	1662695
(10) Value of interest in pooled separate accounts	**1c(10)**	0	0
(11) Value of interest in master trust investment accounts	**1c(11)**	0	0
(12) Value of interest in 103-12 investment entities	**1c(12)**	0	0
(13) Value of interest in registered investment companies (e.g., mutual funds)	**1c(13)**	1651161	287842
(14) Value of funds held in insurance company general account (unallocated contracts)	**1c(14)**	0	25319
(15) Other	**1c(15)**	0	0

		(a) Beginning of Year	(b) End of Year
1d Employer-related investments:			
(1) Employer securities	1d(1)	0	0
(2) Employer real property	1d(2)	0	0
1e Buildings and other property used in plan operation	1e	0	0
1f Total assets (add all amounts in lines 1a through 1e)	1f	1654504	2005528
Liabilities			
1g Benefit claims payable	1g	0	0
1h Operating payables	1h	0	0
1i Acquisition indebtedness	1i	0	0
1j Other liabilities	1j	0	0
1k Total liabilities (add all amounts in lines 1g through1j)	1k	0	0
Net Assets			
1l Net assets (subtract line 1k from line 1f)	1l	1654504	2005528

Part II Income and Expense Statement

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

Income		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: **(A)** Employers	2a(1)(A)	295613	
(B) Participants	2a(1)(B)	671558	
(C) Others (including rollovers)	2a(1)(C)	20192	
(2) Noncash contributions	2a(2)	0	
(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		987363
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	16	
(B) U.S. Government securities	2b(1)(B)	0	
(C) Corporate debt instruments	2b(1)(C)	0	
(D) Loans (other than to participants)	2b(1)(D)	0	
(E) Participant loans	2b(1)(E)	183	
(F) Other	2b(1)(F)	267	
(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		466
(2) Dividends: **(A)** Preferred stock	2b(2)(A)	0	
(B) Common stock	2b(2)(B)	0	
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	5633	
(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		5633
(3) Rents	2b(3)		0
(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)	0	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	0	
(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		0
(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)	0	
(B) Other	2b(5)(B)	0	
(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		0

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		10510
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		0
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		0
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		0
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		-10142
c Other income	2c		-319641
d Total income. Add all **income** amounts in column (b) and enter total	2d		674189

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	312563	
(2) To insurance carriers for the provision of benefits	2e(2)	0	
(3) Other	2e(3)	0	
(4) Total benefit payments. Add lines **2e(1)** through **(3)**	2e(4)		312563
f Corrective distributions (see instructions)	2f		0
g Certain deemed distributions of participant loans (see instructions)	2g		0
h Interest expense	2h		0
i Administrative expenses:			
(1) Salaries and allowances	2i(1)		
(2) Contract administrator fees	2i(2)	0	
(3) Recordkeeping fees	2i(3)		
(4) IQPA audit fees	2i(4)		
(5) Investment advisory and investment management fees	2i(5)	14	
(6) Bank or trust company trustee/custodial fees	2i(6)		
(7) Actuarial fees	2i(7)		
(8) Legal fees	2i(8)		
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)		
(11) Other expenses	2i(11)	10588	
(12) Total administrative expenses. Add lines **2i(1)** through **(11)**	2i(12)		10602
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		323165

Net Income and Reconciliation

k Net income (loss). Subtract line **2j** from line **2d**	2k		351024
l Transfers of assets:			
(1) To this plan	2l(1)		0
(2) From this plan	2l(2)		0

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) [X] 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) [X] 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: DSR CPA AND CONSULTANTS **(2)** EIN: 83-3983879

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

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

Part IV Compliance Questions

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

	During the plan year:		Yes	No	Amount
a	Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)	**4a**		X	
b	Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)	**4b**		X	
c	Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	**4c**		X	
d	Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)	**4d**		X	
e	Was this plan covered by a fidelity bond?	**4e**	X		1000000
f	Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	**4f**		X	
g	Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	**4g**		X	
h	Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	**4h**		X	
i	Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	**4i**	X		
j	Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)	**4j**		X	
k	Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	**4k**		X	
l	Has the plan failed to provide any benefit when due under the plan?	**4l**		X	
m	If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	**4m**	X		
n	If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	**4n**	X		

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

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

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

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

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

SCHEDULE R (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Retirement Plan Information This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 **2025** This Form is Open to Public Inspection.

For calendar plan year 2025 or fiscal plan year beginning 01/01/2022 and ending 12/31/2022

A Name of plan PCS SOFTWARE INC. 401(K) PROFIT SHARING PLAN AND TRUST	**B** Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 PCS SOFTWARE INC.	**D** Employer Identification Number (EIN) 76-0690054

Part I Distributions

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

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

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

EIN(s): 16-1470238 04-6568107

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

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

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

4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)?.......... ☐ Yes ☐ No ☐ N/A

If the plan is a defined benefit plan, go to line 8.

5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. **Date:** Month ______ Day ______ Year ______

If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.

6 a Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived).......... **6a**

b Enter the amount contributed by the employer to the plan for this plan year.......... **6b**

c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount).......... **6c**

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

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

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

Part III Amendments

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

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

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

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

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

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

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

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

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____________
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

a Name of contributing employer

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

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____________
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): ________________________________

a Name of contributing employer

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

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____________
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): ________________________________

a Name of contributing employer

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

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____________
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): ________________________________

a Name of contributing employer

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

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____________
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): ________________________________

a Name of contributing employer

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

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____________
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): ________________________________

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

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

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

a The corresponding number for the plan year immediately preceding the current plan year........	**15a**	
b The corresponding number for the second preceding plan year	**15b**	

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

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

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

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

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

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

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

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

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

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

b If line 20a is "Yes," has PBGC been notified as required by ERISA sections 4043(c)(5) and/or 303(k)(4)? Check the applicable box:

☐ Yes.

☐ No. Reporting was waived under 29 CFR 4043.25(c)(2) because contributions equal to or exceeding the unpaid minimum required contribution were made by the 30th day after the due date.

☐ No. The 30-day period referenced in 29 CFR 4043.25(c)(2) has not yet ended, and the sponsor intends to make a contribution equal to or exceeding the unpaid minimum required contribution by the 30th day after the due date.

☐ No. Other. Provide explanation.____

Part VII IRS Compliance Questions

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

21b If this is a Code section 401(k) plan, check all boxes that apply to indicate how the plan is intended to satisfy the nondiscrimination requirements for employee deferrals and employer matching contributions (as applicable) under Code sections 401(k)(3) and 401(m)(2).

☐ Design-based safe harbor method

☐ "Prior year" ADP test

☐ "Current year" ADP test

☐ N/A

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

PCS SOFTWARE INC. 401(K) PROFIT SHARING PLAN AND TRUST

FINANCIAL STATEMENTS

DECEMBER 31, 2022

PCS SOFTWARE INC. 401(K) PROFIT SHARING PLAN AND TRUST

TABLE OF CONTENTS

REPORT OF INDEPENDENT CERTIFIED PUBLIC ACCOUNTANT

To the Plan Administrator
PCS Software Inc. 401(k) Profit Sharing Plan and Trust
Herndon, VA

Scope and Nature of the ERISA Section 103(a)(3)(C) Audit for the 2022 Financial Statements

We have performed an audit of the financial statements of PCS Software Inc. 401(k) Profit Sharing Plan and 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 statement of net assets available for benefits as of December 31, 2022, and the related statement of changes in net assets available for benefits for the year then ended, and the related notes to the financial statements (2022 Financial Statements).

Management, having determined it is permissible in the circumstances, has elected to have the audit of the 2022 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 audit need not extend to any statements or information related to assets held for investment of the plan (investment information) by a bank or similar institution or insurance carrier that is regulated, supervised, and subject to periodic examination by a state or federal agency, provided that the statements or information regarding assets so held are prepared and certified to by the bank or similar institution or insurance carrier in accordance with 29 CFR 2520.103-5 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA (qualified institution).

Management has obtained a certification from a qualified institution as of and for the year ended December 31, 2022, stating that the certified investment information, as described in Note 3 to the financial statements, is complete and accurate.

Opinion on the 2022 Financial Statements

In our opinion, based on our audit and on the procedures performed as described in the Auditor's Responsibilities for the Audit of the 2022 Financial Statements section

- the amounts and disclosures in the accompanying 2022 financial statements, other than those agreed to or derived from the certified investment information, are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America.
- the information in the accompanying 2022 financial statements related to assets held by and certified to by a qualified institution agrees to, or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).

Basis for Opinion on the 2022 Financial Statements

We conducted our audit in accordance with auditing standards generally accepted in the United States of America (GAAS). Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the 2022 Financial Statements section of our report. We are required to be independent of PCS Software Inc. 401(k) Profit Sharing Plan and 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 2022 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 PCS Software Inc. 401(k) Profit Sharing Plan and 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 2022 Financial Statements

Except as described in the Scope and Nature of the ERISA Section 103(a)(3)(C) Audit of the 2022 Financial Statements section of our report, our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if, there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.

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

- 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 PCS Software Inc. 401(k) Profit Sharing Plan and 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 PCS Software Inc. 401(k) Profit Sharing Plan and Trust's ability to continue as a going concern for a reasonable period of time.

Our audit did not extend to the certified investment information, except for obtaining and reading the certification, comparing the certified investment information with the related information presented and disclosed in the 2022 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 Matters

2022 Supplemental Schedules Required by ERISA

The supplemental schedule of Schedule of Assets (Held at end of Year) 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 audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS. For information included in the supplemental schedules that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

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

In our opinion

- the form and content of the supplemental schedules, other than the information in the supplemental schedules that agreed to or is derived from the certified investment information, are presented, in all material respects, in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

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

Accountant's Compilation Report on 2021 Financial Statement

Management is responsible for the accompanying statement of net assets available for benefits of PCS Software Inc. 401(k) Profit Sharing Plan and Trust as of December 31, 2021, and the related notes to the financial statements in accordance with accounting principles generally accepted in the United States of America. We have performed a compilation engagement in accordance with Statements on Standards for Accounting and Review Services promulgated by the Accounting and Review Services Committee of the AICPA. We did not audit or review the financial statement nor were we required to perform any procedures to verify the accuracy or completeness of the information provided by management. Accordingly, we do not express an opinion, a conclusion, nor provide any form of assurance on this financial statement.

DSR CPA and Consultants

Weston, FL
December 12, 2023

1792 Bell Tower Lane
Weston, FL 33326
1-888-682-6885

PCS SOFTWARE INC. 401k PROFIT SHARING PLAN AND TRUST

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

DECEMBER 31, 2022 AND 2021

	2022	Unaudited 2021
ASSETS		
Investments at fair value (see note 4)	$ 1,952,227	$ 1,651,161
Investments at contract value (see note 6)	25,319	-
Receivables:		
Employer contribution	-	-
Participant contributions	-	-
Notes receivable from participants	27,982	3,343
Total receivables	27,982	3,343
Total assets	2,005,528	1,654,504
LIABILITIES AND NET ASSETS		
Liabilities	-	-
Total liabilities	-	-
Net Assets available for Benefits	$ 2,005,528	$ 1,654,504

See accompanying notes to the financial statements.

PCS SOFTWARE INC. 401k PROFIT SHARING PLAN AND TRUST

STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

FOR THE YEAR ENDED DECEMBER 31, 2022

	2022
ADDITIONS	
Additions to Net Assets Attributed to:	
Investment income (loss):	
Interest	466
Dividends	10,024
Net depreciation in fair value of investments	(322,869)
Net investment income (loss)	(312,379)
Employer contributions	295,613
Participant contributions (including rollovers)	691,750
	987,363
Total additions (deductions)	674,984
DEDUCTIONS	
Deductions from Net Assets Attributed to:	
Benefits paid to participants	312,563
Administrative fees	10,602
Other expense	795
Total deductions	323,960
Net Increase (Decrease)	351,024
Net Assets Available for Benefits:	
Beginning of year	1,654,504
End of year	$ 2,005,528

See accompanying notes to the financial statements.

NOTE 1. DESCRIPTION OF THE PLAN

The following description of the PCS Software Inc. 401(k) Profit Sharing Plan and Trust (the Plan) provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

General

The Plan is a defined contribution plan effective January 1 2015, and restated May 22, 2022, covering eligible employees. The Plan is subject to the provisions of ERISA. All employees of PCS Software Inc. (the "Company") or (the "Plan Sponsor") are immediately eligible to participate in the plan expect union employees, nonresident aliens and certain employees covered under 410(b)(6)(c). Employees are eligible for the employer profit sharing contribution after one year of eligible service/

Contributions

Each year participants may contribute up to 92% of their compensation to the Plan not to exceed the maximum allowable IRC 402(g) limit of $20,500 for 2022. Participants who have attained age 50 before the end of the plan year are eligible to make catch-up contributions. Participants may also rollover amounts representing distributions from other qualified plans. Roth elective deferrals are permitted under the Plan.

The Company has a safe harbor contribution of 4% of each participant's compensation. Additional discretionary matching contributions and nonelective contribution can be made at the discretion of the Company. The maximum IRC 415 limit for total contributions made on behalf of a participant (deferrals and employer contributions) is $61,000 for 2022. Catch-up contributions can be made in excess of this limit.

Participants direct the investment of their contributions into various investment options offered by the plan. The plan currently offers various mutual funds, common collective trust and a stable value fund.

Participant Accounts

Each participant's account is credited with the participant's contribution and Company matching contributions as well as allocations of plan earnings. Participant accounts are charged with an allocation of administrative expenses that were paid by the Plan. Allocations are based on participant earnings or account balances, or specific participant transactions, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested balance.

Vesting

Participants are vested immediately in their contributions, safe harbor contributions, employer profit sharing contributions and earnings thereon.

NOTE 1. DESCRIPTION OF THE PLAN (continued)

Notes Receivable from Participants

Participants may borrow from their fund accounts up to a maximum of $50,000 or 50% of their account balance. The loans are secured by the balance in the participant's account. The loan must bear a reasonable amount of interest. The interest rate for 2022 ranged from 4.25% to 8.00%. Principal and interest are paid ratably through monthly payroll deductions.

Payment of Benefits

On termination of service due to death, disability, retirement or other reasons, a participant may receive the value of the vested interest in his or her account as a lump-sum distribution, partial withdrawal, annuity contract or installments. In-service withdrawals allowed for hardships and at age 59 ½.

The distributable amount is equal to the value of the participant’s vested interest in his or her account. Employees who elect to have their benefit payments deferred continue to share in allocations of investment income and losses but do not share in subsequent allocations of discretionary contributions.

Forfeitures

At December 31, 2022 and 2021, forfeited non-vested accounts totaled $1 and $1415, respectively. These accounts will be used to reduce future employer contributions and administrative expenses. In 2022, employer contributions were reduced by $888 from forfeited non-vested accounts.

NOTE 2. SUMMARY OF ACCOUNTING POLICIES

Basis of Accounting

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

Use of Estimates

The preparation of financial statements in accordance with accounting principles generally accepted in the United States of America 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.

NOTE 2. SUMMARY OF ACCOUNTING POLICIES (Continued)

Investment Valuation and Income Recognition

Investments are reported at fair value (except for the fully benefit-responsive investment contract, which is reported at contract value). Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See note 4 for discussion of fair value measurements.

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

Notes Receivable from Participants

Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Interest income is recorded on the accrual basis. Related fees are recorded as administrative expenses and are expensed when they are incurred. No allowance for credit losses have been recorded as of December 31, 2022 or 2021.

Payments of Benefits

Benefits are recorded when paid.

Administrative Expenses

Certain expenses of maintaining the Plan are paid by the Plan, unless otherwise paid by the Company. Expenses that are paid by the Company are excluded from these financial statements. Fees related to the administration of notes receivable from participants are charged directly to the participant's account and are included in administrative expenses. Investments related expenses are included in net appreciation (depreciation) of the fair value of investments.

Subsequent Events

The plan has evaluated subsequent events through December 12, 2023 the date of the financial statements were available to be issued.

NOTE 3. INFORMATION PREPARED AND CERTIFIED BY TRUSTEE

Certain information related to investments and notes receivables from participants disclosed in the accompanying financial statements and ERISA-required supplemental schedule, including investments and notes receivable from participants held at December 31, 2022, and net appreciation in fair value of investments, interest and dividends , and interest income on notes receivable from participants for the period of June 20, 2022 to December 31, 2022, was obtained by management and agreed to or derived from information certified as complete and accurate by Fidelity Management Trust Company (the Trustee of the Plan from June 20, 2022 to December 21, 2022).

NOTE 3. INFORMATION PREPARED AND CERTIFIED BY TRUSTEE (Continued)

	2022
Statement of net assets available for benefits:	
Investments at fair value	$ 1,952,227
Investments at contract value	25,319
Notes Receivable	27,982
Statement of changes in net assets available for benefits:	
Investment income:	
Interest and dividends	6,099
Net appreciation/ (depreciation) in fair value of investments	
Common Collective Trust	10,510
Registered Investment Companies	(10,142)

Note: 2021 Investments and Investment income from 1/1/2022 to 6/20/2022 were held my Mid Atlantic Trust Company and were not certified

NOTE 4. FAIR VALUE MEASUREMENTS

The framework for measuring fair value provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (level 1 measurements) and the lowest priority to unobservable inputs (level 3 measurements). The three levels of the fair value hierarchy under FASB ASC 820 as 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 similar assets or liabilities in inactive markets;* • *inputs other than quoted prices that are observable for the asset or liability;* • *inputs that are derived principally from or corroborated by observable market data by correlation or other means.* *If the asset or liability has a specified (contractual) term, the level 2 input must be observable for substantially the full term of the asset or liability.*
Level 3	*Inputs to the valuation methodology are unobservable and significant to the fair value measurement.*

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

NOTE 4. FAIR VALUE MEASUREMENTS (Continued)

The following is a description of the valuation methodologies used for asset measured at fair value. There have been no changes in the methodologies used at December 31, 2022 and 2021.

Mutual funds/Collective trust funds/Money market funds: Valued at the closing price reported on the active market on which the Fund is traded.

The following table sets forth by level, within the fair value hierarchy, the plan's assets at fair value as of December 31, 2022 and 2021:

	Asset at Fair Value as of December 31, 2022			
	Level 1	Level 2	Level 3	Total
Money Market Funds	1,690	-	-	1,690
Common Collective Trust	1,662,695	-	-	1,662,695
Registered Investment Companies	287,842	-	-	287,842
Total asset at fair value	1,952,227	-	-	1,952,227

	Asset at Fair Value as of December 31, 2021			
	Level 1	Level 2	Level 3	Total
Registered Investment Companies	1,651,161	-	-	1,651,161
Total asset at fair value	1,651,161	-	-	1,651,161

NOTE 5. NONPARTICIPANTS-DIRECTED INVESTMENTS

The Plan's participants direct all investments. There are no non-participant directed investments as of December 31, 2022 and 2021.

NOTE 6. LINCOLN STABLE VALUE FUND

The Lincoln Stable Value Account is a fixed group annuity issued by The Lincoln National Life Insurance Company. Contract value is the relevant measure attributed to that portion of the net assets available for benefits of a defined contribution plan attributable to fully benefit-responsive investment contracts because contract value is the amount participants would receive if they were to initiate permitted transactions under the terms of the contract. The Lincoln contract had an average yield of 1.63% and 2.20% (annualized) for the year ended December 31, 2022, with a guaranteed minimum interest rate of 1.00%. At December 31, 2022 the crediting interest rate was 1.75%. The balance in the Lincoln stable value account was $25,319 as of December 31, 2022.

NOTE 6. LINCOLN STABLE VALUE FUND (Continued)

Certain events limit the ability of the Plan to transact at contract value. Such events include the following: (1) amendments to the Plan documents (including complete or partial Plan termination or merger with another Plan), (2) changes to the Plan's prohibition on competing investment options or deletion of equity wash provisions, (3) bankruptcy of the Plan sponsor or other Plan sponsor events (for example, divestitures or spin-offs of a subsidiary) that cause a significant withdrawal from the Plan, or (4) the failure to qualify for exemption from federal income taxes or any required prohibited transaction exemption under ERISA. The Plan administrator does not believe that the occurrence of any such value event, which would limit the Plan's ability to transact at contract value with participants, is probable.

NOTE 7. RELATED-PARTY TRANSACTIONS

Certain Plan investments are managed by Fidelity Management Trust Company and Mid Atlantic Trust Company. Fidelity Management Trust Company and Mid Atlantic Trust Company were the Trustees for the Plan and, therefore, these transactions qualify as party in interest transactions. The Plan also made direct payments to third party administrators of $10,602. The Plan Sponsor pays directly any other fees related to the plan's operations. The Plan Trustee receives fees from administration and investment management.

NOTE 8. PLAN TERMINATION

Although it has not expressed any intent to do so, the Company has the rights under the Plan to discontinue its contributions at any time and terminate the Plan subject to the provisions of ERISA. In the event of Plan termination, the participants would become 100 percent vested in their employer contributions.

NOTE 9. TAX STATUS

The IRS has determined and informed the Company by letter August 31, 2020 in which the Internal Service stated that the Plan, is designed, in accordance with the applicable sections of the Internal Revenue Code. Although the Plan has been amended since receiving the determination letter, the Plan Administrator believes that the Plan is designed and is currently being operated, in compliance with the applicable requirements of the Internal Revenue Code and therefore, believe that the Plan is qualified and tax exempt.

Accounting principles generally accepted in the United States of America require plan management to evaluate tax positions taken by the Plan and recognize a tax liability if the plan has taken an uncertain position that more likely than not would be sustained upon examination by the Internal Revenue Service. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

NOTE 10. RISK AND UNCERTAINTIES

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

PCS SOFTWARE INC. 401(K) PROFIT SHARING PLAN AND TRUST

REQUIRED SUPPLEMENTAL SCHEDULE

DECEMBER 31, 2022

PCS SOFTWARE INC. 401k PROFIT SHARING PLAN AND TRUST

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

DECEMBER 31, 2022

EIN 76-0590054
PLAN 001

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment including maturity date, rate of interest, collateral, par, or maturity date	(d) Cost	(e) Current Value	
	COMMON COLLECTIVE TRUST				
	WILMINGTON TRUST FUDUCIARY SERVICES	SMALL CAP GR II R1	**	$ 1,924	
	WILMINGTON TRUST FUDUCIARY SERVICES	WT EMERGING MKTS R1	**	21,844	
	WILMINGTON TRUST FUDUCIARY SERVICES	FLEXPATH MOD 2065 R1	**	19,826	
	WILMINGTON TRUST FUDUCIARY SERVICES	PUTN LARGE CP VAL R1	**	36,849	
	WILMINGTON TRUST FUDUCIARY SERVICES	BLKRK R2000 IDX R	**	3,764	
	WILMINGTON TRUST FUDUCIARY SERVICES	FLEXPATH MOD RET R1	**	41,103	
	WILMINGTON TRUST FUDUCIARY SERVICES	FLEXPATH MOD 2025 R1	**	228,731	
	WILMINGTON TRUST FUDUCIARY SERVICES	FLEXPATH MOD 2035 R1	**	512,862	
	WILMINGTON TRUST FUDUCIARY SERVICES	FLEXPATH MOD 2045 R1	**	198,147	
	WILMINGTON TRUST FUDUCIARY SERVICES	FLEXPATH MOD 2055 R1	**	597,645	
	REGISTERED INVESTMENT COMPANIES				
	THORNBURG	THORNBURG STR INC R6	**	15,658	
	JP MORGAN	JPM LG CAP GROWTH R6	**	62,856	
*	FIDELITY	FID US BOND IDX	**	39,794	
*	FIDELITY	FID 500 INDEX	**	103,790	
*	FIDELITY	FID MID CAP IDX	**	33,631	
*	FIDELITY	FID REAL ESTATE IDX	**	14	
*	FIDELITY	FID INTL INDEX	**	24,042	
*	FIDELITY	FID INFL PR BD IDX	**	8,057	
	CASH	CASH	**	1,690	
	STABLE VALUE FUND				
	LINCOLN	LINCOLN STABLE VALUE	**	25,319	***
				$ 1,977,546	
*	Participants Loans (4.25% to 8.00%)			27,982	
	Total investments			$ 2,005,528	

*Party-in-interest as defined by ERISA.

** Cost information not required for participant-directed investments

---

T R I A L B A L A N C E

PCS SOFTWARE INC. 401(K) PROFIT
SHARING PLAN AND TRUST

F O R T H E P E R I O D 06/20/2022 T O 12/31/2022

T R I A L   B A L A N C E

PCS SOFTWARE INC. 401(K) PROFIT
SHARING PLAN AND TRUST

T A B L E   O F   C O N T E N T S

SECTION :

I. MARKET VALUE REPORT

FUND CODE	FUND NAME	SHARES 06/19/2022	SHARES 12/31/2022	PRICE 06/19/2022	PRICE 12/31/2022	MARKET VALUE 06/19/2022	MARKET VALUE 12/31/2022	MKT VALUE ALLOCATION
2326	FID US BOND IDX	0.000	3,909.058	$10.51	$10.18	$0.00	$39,794.22	02.01%
2328	FID 500 INDEX	0.000	779.671	$128.01	$133.12	$0.00	$103,789.78	05.25%
2352	FID MID CAP IDX	0.000	1,297.485	$24.49	$25.92	$0.00	$33,630.81	01.70%
2355	FID REAL ESTATE IDX	0.000	0.972	$15.34	$14.53	$0.00	$14.10	00.00%
2363	FID INTL INDEX	0.000	583.681	$39.29	$41.19	$0.00	$24,041.82	01.22%
2418	FID INFL PR BD IDX	0.000	893.233	$10.22	$9.02	$0.00	$8,056.93	00.41%
3067	FID GOVT MMKT K6	0.000	40.370	$1.00	$1.00	$0.00	$40.37	00.00%
GBDW	LINCOLN STABLE VALUE	0.000	25,319.120	$1.00	$1.00	$0.00	$25,319.12	01.28%
O21R	SMALL CAP GR II R1	0.000	224.029	$8.27	$8.59	$0.00	$1,924.40	00.10%
O38C	WT EMERGING MKTS R1	0.000	3,381.350	$6.31	$6.46	$0.00	$21,843.51	01.11%
O6C9	FLEXPATH MOD 2065 R1	0.000	2,429.716	$7.83	$8.16	$0.00	$19,826.50	01.00%
ODO7	PUTN LARGE CP VAL R1	0.000	2,374.314	$13.96	$15.52	$0.00	$36,849.36	01.86%
OGQZ	BLKRK R2000 IDX R	0.000	18.333	$192.52	$205.30	$0.00	$3,763.77	00.19%
OL3J	THORNBURG STR INC R6	0.000	1,410.655	$11.24	$11.10	$0.00	$15,658.27	00.79%
OO6M	FLEXPATH MOD RET R1	0.000	3,213.667	$12.75	$12.79	$0.00	$41,102.81	02.08%
OO6P	FLEXPATH MOD 2025 R1	0.000	16,993.459	$13.38	$13.46	$0.00	$228,731.96	11.58%
OO6S	FLEXPATH MOD 2035 R1	0.000	35,007.639	$14.34	$14.65	$0.00	$512,861.92	25.96%
OO6V	FLEXPATH MOD 2045 R1	0.000	12,734.367	$15.02	$15.56	$0.00	$198,146.76	10.03%
OO6Y	FLEXPATH MOD 2055 R1	0.000	37,849.559	$15.15	$15.79	$0.00	$597,644.55	30.25%
OYQA	JPM LG CAP GROWTH R6	0.000	1,339.646	$46.33	$46.92	$0.00	$62,856.18	03.18%
TOTAL MARKET VALUE :						$0.00	$1,975,897.14	
NET CHANGE :							$1,975,897.14	

II. PLAN ACTIVITY SUMMARY

ACCOUNTING ITEM	<-BEGINNING BALANCE-> AS OF 06/19/2022 CASH	<------ACTIVITY-----> FROM 06/20/2022 TO 12/31/2022 CASH	<---ENDING BALANCE---> AS OF 12/31/2022 CASH
CONTRIBUTION	$0.00	$526,799.06	$526,799.06
DIVIDEND	0.00	5,665.32	5,665.32
INTEREST	0.00	126.85	126.85
EXCHANGE IN	0.00	159,461.64	159,461.64
REALIZED G/L	0.00	628.95	628.95
BALANCE FORWARD	0.00	1,546,206.54	1,546,206.54
LOAN WITHDRAWAL	0.00	(25,500.00)	(25,500.00)
WITHDRAWAL	0.00	(74,803.10)	(74,803.10)
EXCHANGE OUT	0.00	(159,461.64)	(159,461.64)
FEES	0.00	(4,958.53)	(4,958.53)
LOAN REPAYMENT	0.00	1,746.70	1,746.70
INTEREST ON LOAN	0.00	139.66	139.66
GIC INTEREST	0.00	265.78	265.78
GRAND TOTAL:	$0.00	$1,976,317.23	$1,976,317.23
ENDING MARKET VALUE			$1,975,897.14

III. FUND TOTALS

ACCOUNTING ITEM	<-BEGINNING BALANCE-> AS OF 06/19/2022 CASH	SHARES/UNITS	<------ACTIVITY-----> FROM 06/20/2022 TO 12/31/2022 CASH	SHARES/UNITS	<---ENDING BALANCE---> AS OF 12/31/2022 CASH	SHARES/UNITS
0458 FID GOVT MMKT						
CONTRIBUTION	0.00	0.000	0.00	0.000	0.00	0.000
DIVIDEND	0.00	0.000	49.29	49.290	49.29	49.290
INTEREST	0.00	0.000	(49.29)	(49.290)	(49.29)	(49.290)
LOAN REPAYMENT	0.00	0.000	0.00	0.000	0.00	0.000
TOTAL	$0.00	0.000	$0.00	0.000	$0.00	0.000
ENDING NAV VALUE						$1.00
ENDING MARKET VALUE						$0.00

ACCOUNTING ITEM	<-BEGINNING BALANCE-> AS OF 06/19/2022 CASH	SHARES/UNITS	<------ACTIVITY-----> FROM 06/20/2022 TO 12/31/2022 CASH	SHARES/UNITS	<---ENDING BALANCE---> AS OF 12/31/2022 CASH	SHARES/UNITS
2326 FID US BOND IDX						
CONTRIBUTION	0.00	0.000	6,588.28	627.975	6,588.28	627.975
DIVIDEND	0.00	0.000	381.78	37.211	381.78	37.211
INTEREST	0.00	0.000	2.46	0.228	2.46	0.228
EXCHANGE IN	0.00	0.000	13,088.98	1,298.202	13,088.98	1,298.202
REALIZED G/L	0.00	0.000	(51.21)	0.000	(51.21)	0.000
BALANCE FORWARD	0.00	0.000	21,826.91	2,051.401	21,826.91	2,051.401
WITHDRAWAL	0.00	0.000	(979.72)	(96.524)	(979.72)	(96.524)
FEES	0.00	0.000	(94.80)	(9.435)	(94.80)	(9.435)
TOTAL	$0.00	0.000	$40,762.68	3,909.058	$40,762.68	3,909.058
ENDING NAV VALUE						$10.18
ENDING MARKET VALUE						$39,794.22

ACCOUNTING ITEM	<-BEGINNING BALANCE-> AS OF 06/19/2022 CASH	SHARES/UNITS	<------ACTIVITY-----> FROM 06/20/2022 TO 12/31/2022 CASH	SHARES/UNITS	<---ENDING BALANCE---> AS OF 12/31/2022 CASH	SHARES/UNITS
2328 FID 500 INDEX						
CONTRIBUTION	0.00	0.000	44,000.33	321.965	44,000.33	321.965
DIVIDEND	0.00	0.000	1,053.95	8.062	1,053.95	8.062
INTEREST	0.00	0.000	5.15	0.038	5.15	0.038
EXCHANGE IN	0.00	0.000	44,183.39	314.663	44,183.39	314.663
REALIZED G/L	0.00	0.000	174.29	0.000	174.29	0.000
BALANCE FORWARD	0.00	0.000	38,589.04	292.517	38,589.04	292.517
LOAN WITHDRAWAL	0.00	0.000	(4,984.19)	(37.349)	(4,984.19)	(37.349)
WITHDRAWAL	0.00	0.000	(2,278.48)	(17.165)	(2,278.48)	(17.165)
EXCHANGE OUT	0.00	0.000	(14,022.39)	(101.161)	(14,022.39)	(101.161)
FEES	0.00	0.000	(254.78)	(1.899)	(254.78)	(1.899)
TOTAL	$0.00	0.000	$106,466.31	779.671	$106,466.31	779.671
ENDING NAV VALUE						$133.12
ENDING MARKET VALUE						$103,789.78

ACCOUNTING ITEM	<-BEGINNING BALANCE-> AS OF 06/19/2022 CASH	SHARES/UNITS	<------ACTIVITY-----> FROM 06/20/2022 TO 12/31/2022 CASH	SHARES/UNITS	<---ENDING BALANCE---> AS OF 12/31/2022 CASH	SHARES/UNITS
2352 FID MID CAP IDX						
CONTRIBUTION	0.00	0.000	8,749.74	330.271	8,749.74	330.271
DIVIDEND	0.00	0.000	437.23	16.875	437.23	16.875
INTEREST	0.00	0.000	2.14	0.080	2.14	0.080
EXCHANGE IN	0.00	0.000	7,743.47	288.981	7,743.47	288.981
REALIZED G/L	0.00	0.000	58.17	0.000	58.17	0.000
BALANCE FORWARD	0.00	0.000	18,013.12	723.709	18,013.12	723.709
LOAN WITHDRAWAL	0.00	0.000	(1,442.24)	(55.428)	(1,442.24)	(55.428)
EXCHANGE OUT	0.00	0.000	(113.34)	(4.143)	(113.34)	(4.143)
FEES	0.00	0.000	(75.28)	(2.860)	(75.28)	(2.860)
TOTAL	$0.00	0.000	$33,373.01	1,297.485	$33,373.01	1,297.485
ENDING NAV VALUE						$25.92
ENDING MARKET VALUE						$33,630.81

ACCOUNTING ITEM	<-BEGINNING BALANCE-> AS OF 06/19/2022 CASH	SHARES/UNITS	<------ACTIVITY-----> FROM 06/20/2022 TO 12/31/2022 CASH	SHARES/UNITS	<---ENDING BALANCE---> AS OF 12/31/2022 CASH	SHARES/UNITS
2355 FID REAL ESTATE IDX						
CONTRIBUTION	0.00	0.000	935.80	62.212	935.80	62.212
DIVIDEND	0.00	0.000	96.55	5.783	96.55	5.783
EXCHANGE IN	0.00	0.000	10,141.18	568.467	10,141.18	568.467
REALIZED G/L	0.00	0.000	(1,420.78)	0.000	(1,420.78)	0.000
EXCHANGE OUT	0.00	0.000	(9,715.45)	(634.009)	(9,715.45)	(634.009)
FEES	0.00	0.000	(22.42)	(1.481)	(22.42)	(1.481)
TOTAL	$0.00	0.000	$14.88	0.972	$14.88	0.972
ENDING NAV VALUE						$14.53
ENDING MARKET VALUE						$14.10

ACCOUNTING ITEM	<-BEGINNING BALANCE-> AS OF 06/19/2022 CASH	SHARES/UNITS	<------ACTIVITY-----> FROM 06/20/2022 TO 12/31/2022 CASH	SHARES/UNITS	<---ENDING BALANCE---> AS OF 12/31/2022 CASH	SHARES/UNITS
2363 FID INTL INDEX						
CONTRIBUTION	0.00	0.000	5,322.59	133.617	5,322.59	133.617
DIVIDEND	0.00	0.000	612.76	14.686	612.76	14.686
INTEREST	0.00	0.000	2.43	0.059	2.43	0.059
EXCHANGE IN	0.00	0.000	12,052.90	313.904	12,052.90	313.904
REALIZED G/L	0.00	0.000	(1,408.75)	0.000	(1,408.75)	0.000
BALANCE FORWARD	0.00	0.000	23,152.59	581.285	23,152.59	581.285
WITHDRAWAL	0.00	0.000	(15,632.09)	(430.162)	(15,632.09)	(430.162)
EXCHANGE OUT	0.00	0.000	(1,150.64)	(27.554)	(1,150.64)	(27.554)
FEES	0.00	0.000	(83.03)	(2.154)	(83.03)	(2.154)
LOAN REPAYMENT	0.00	0.000	0.00	0.000	0.00	0.000
INTEREST ON LOAN	0.00	0.000	0.00	0.000	0.00	0.000
TOTAL	$0.00	0.000	$22,868.76	583.681	$22,868.76	583.681
ENDING NAV VALUE						$41.19
ENDING MARKET VALUE						$24,041.82

ACCOUNTING ITEM	<-BEGINNING BALANCE-> AS OF 06/19/2022 CASH	SHARES/UNITS	<------ACTIVITY-----> FROM 06/20/2022 TO 12/31/2022 CASH	SHARES/UNITS	<---ENDING BALANCE---> AS OF 12/31/2022 CASH	SHARES/UNITS
2418 FID INFL PR BD IDX						
CONTRIBUTION	0.00	0.000	4,095.04	403.223	4,095.04	403.223
DIVIDEND	0.00	0.000	681.23	75.108	681.23	75.108
INTEREST	0.00	0.000	0.99	0.095	0.99	0.095
EXCHANGE IN	0.00	0.000	2,152.15	208.582	2,152.15	208.582
REALIZED G/L	0.00	0.000	(142.28)	0.000	(142.28)	0.000
BALANCE FORWARD	0.00	0.000	4,330.58	426.659	4,330.58	426.659
LOAN WITHDRAWAL	0.00	0.000	(317.08)	(35.075)	(317.08)	(35.075)
EXCHANGE OUT	0.00	0.000	(1,797.82)	(183.078)	(1,797.82)	(183.078)
FEES	0.00	0.000	(22.41)	(2.281)	(22.41)	(2.281)
LOAN REPAYMENT	0.00	0.000	0.00	0.000	0.00	0.000
INTEREST ON LOAN	0.00	0.000	0.00	0.000	0.00	0.000
TOTAL	$0.00	0.000	$8,980.40	893.233	$8,980.40	893.233

ENDING NAV VALUE	$9.02
ENDING MARKET VALUE	$8,056.93

ACCOUNTING ITEM	<-BEGINNING BALANCE-> AS OF 06/19/2022 CASH	SHARES/UNITS	<------ACTIVITY-----> FROM 06/20/2022 TO 12/31/2022 CASH	SHARES/UNITS	<---ENDING BALANCE---> AS OF 12/31/2022 CASH	SHARES/UNITS
3067 FID GOVT MMKT K6						
DIVIDEND	0.00	0.000	0.20	0.200	0.20	0.200
FEES	0.00	0.000	40.17	40.170	40.17	40.170
TOTAL	$0.00	0.000	$40.37	40.370	$40.37	40.370
ENDING NAV VALUE						$1.00
ENDING MARKET VALUE						$40.37

ACCOUNTING ITEM	<-BEGINNING BALANCE-> AS OF 06/19/2022 CASH	SHARES/UNITS	<------ACTIVITY-----> FROM 06/20/2022 TO 12/31/2022 CASH	SHARES/UNITS	<---ENDING BALANCE---> AS OF 12/31/2022 CASH	SHARES/UNITS
GBDW LINCOLN STABLE VALUE						
CONTRIBUTION	0.00	0.000	2,738.65	2,738.650	2,738.65	2,738.650
INTEREST	0.00	0.000	1.47	1.470	1.47	1.470
EXCHANGE IN	0.00	0.000	12,659.36	12,659.360	12,659.36	12,659.360
BALANCE FORWARD	0.00	0.000	17,753.63	17,753.630	17,753.63	17,753.630
LOAN WITHDRAWAL	0.00	0.000	(6,766.70)	(6,766.700)	(6,766.70)	(6,766.700)
EXCHANGE OUT	0.00	0.000	(1,259.25)	(1,259.250)	(1,259.25)	(1,259.250)
FEES	0.00	0.000	(73.82)	(73.820)	(73.82)	(73.820)
LOAN REPAYMENT	0.00	0.000	0.00	0.000	0.00	0.000
INTEREST ON LOAN	0.00	0.000	0.00	0.000	0.00	0.000
GIC INTEREST	0.00	0.000	265.78	265.780	265.78	265.780
TOTAL	$0.00	0.000	$25,319.12	25,319.120	$25,319.12	25,319.120
ENDING NAV VALUE						$1.00
ENDING MARKET VALUE						$25,319.12

ACCOUNTING ITEM	<-BEGINNING BALANCE-> AS OF 06/19/2022 CASH	SHARES/UNITS	<------ACTIVITY-----> FROM 06/20/2022 TO 12/31/2022 CASH	SHARES/UNITS	<---ENDING BALANCE---> AS OF 12/31/2022 CASH	SHARES/UNITS
O21R SMALL CAP GR II R1						
CONTRIBUTION	0.00	0.000	615.37	69.528	615.37	69.528
INTEREST	0.00	0.000	0.03	0.003	0.03	0.003
EXCHANGE IN	0.00	0.000	1,441.46	161.228	1,441.46	161.228
REALIZED G/L	0.00	0.000	14.90	0.000	14.90	0.000
BALANCE FORWARD	0.00	0.000	337.40	39.232	337.40	39.232
EXCHANGE OUT	0.00	0.000	(421.45)	(45.464)	(421.45)	(45.464)
FEES	0.00	0.000	(4.30)	(0.498)	(4.30)	(0.498)
TOTAL	$0.00	0.000	$1,983.41	224.029	$1,983.41	224.029
ENDING NAV VALUE						$8.59
ENDING MARKET VALUE						$1,924.40

ACCOUNTING ITEM	<-BEGINNING BALANCE-> AS OF 06/19/2022 CASH	SHARES/UNITS	<------ACTIVITY-----> FROM 06/20/2022 TO 12/31/2022 CASH	SHARES/UNITS	<---ENDING BALANCE---> AS OF 12/31/2022 CASH	SHARES/UNITS
O38C WT EMERGING MKTS R1						
CONTRIBUTION	0.00	0.000	3,433.53	528.054	3,433.53	528.054
INTEREST	0.00	0.000	1.70	0.262	1.70	0.262
EXCHANGE IN	0.00	0.000	5,085.63	872.159	5,085.63	872.159
REALIZED G/L	0.00	0.000	67.58	0.000	67.58	0.000
BALANCE FORWARD	0.00	0.000	15,231.87	2,365.196	15,231.87	2,365.196
LOAN WITHDRAWAL	0.00	0.000	(0.59)	(0.090)	(0.59)	(0.090)
WITHDRAWAL	0.00	0.000	(2,099.32)	(321.488)	(2,099.32)	(321.488)
EXCHANGE OUT	0.00	0.000	(351.30)	(53.715)	(351.30)	(53.715)
FEES	0.00	0.000	(55.88)	(9.028)	(55.88)	(9.028)
TOTAL	$0.00	0.000	$21,313.22	3,381.350	$21,313.22	3,381.350
ENDING NAV VALUE						$6.46
ENDING MARKET VALUE						$21,843.51

ACCOUNTING ITEM	BEGINNING BALANCE AS OF 06/19/2022 CASH	BEGINNING BALANCE AS OF 06/19/2022 SHARES/UNITS	ACTIVITY FROM 06/20/2022 TO 12/31/2022 CASH	ACTIVITY FROM 06/20/2022 TO 12/31/2022 SHARES/UNITS	ENDING BALANCE AS OF 12/31/2022 CASH	ENDING BALANCE AS OF 12/31/2022 SHARES/UNITS
O6C9 FLEXPATH MOD 2065 R1						
CONTRIBUTION	0.00	0.000	5,790.20	709.825	5,790.20	709.825
INTEREST	0.00	0.000	1.54	0.183	1.54	0.183
REALIZED G/L	0.00	0.000	0.17	0.000	0.17	0.000
BALANCE FORWARD	0.00	0.000	13,798.10	1,724.763	13,798.10	1,724.763
FEES	0.00	0.000	(40.70)	(5.055)	(40.70)	(5.055)
TOTAL	$0.00	0.000	$19,549.31	2,429.716	$19,549.31	2,429.716
ENDING NAV VALUE						$8.16
ENDING MARKET VALUE						$19,826.50

ACCOUNTING ITEM	<-BEGINNING BALANCE-> AS OF 06/19/2022 CASH	SHARES/UNITS	<------ACTIVITY-----> FROM 06/20/2022 TO 12/31/2022 CASH	SHARES/UNITS	<---ENDING BALANCE---> AS OF 12/31/2022 CASH	SHARES/UNITS
ODO7 PUTN LARGE CP VAL R1						
CONTRIBUTION	0.00	0.000	6,431.55	421.981	6,431.55	421.981
INTEREST	0.00	0.000	1.62	0.109	1.62	0.109
EXCHANGE IN	0.00	0.000	18,111.47	1,150.272	18,111.47	1,150.272
REALIZED G/L	0.00	0.000	133.30	0.000	133.30	0.000
BALANCE FORWARD	0.00	0.000	13,548.70	942.845	13,548.70	942.845
LOAN WITHDRAWAL	0.00	0.000	(2,139.73)	(137.692)	(2,139.73)	(137.692)
EXCHANGE OUT	0.00	0.000	0.00	0.000	0.00	0.000
FEES	0.00	0.000	(49.31)	(3.201)	(49.31)	(3.201)
LOAN REPAYMENT	0.00	0.000	0.00	0.000	0.00	0.000
INTEREST ON LOAN	0.00	0.000	0.00	0.000	0.00	0.000
TOTAL	$0.00	0.000	$36,037.60	2,374.314	$36,037.60	2,374.314
ENDING NAV VALUE						$15.52
ENDING MARKET VALUE						$36,849.36

ACCOUNTING ITEM	<-BEGINNING BALANCE-> AS OF 06/19/2022 CASH	SHARES/UNITS	<------ACTIVITY-----> FROM 06/20/2022 TO 12/31/2022 CASH	SHARES/UNITS	<---ENDING BALANCE---> AS OF 12/31/2022 CASH	SHARES/UNITS
OGQZ BLKRK R2000 IDX R						
CONTRIBUTION	0.00	0.000	1,286.10	6.050	1,286.10	6.050
INTEREST	0.00	0.000	0.56	0.003	0.56	0.003
EXCHANGE IN	0.00	0.000	3,258.99	15.236	3,258.99	15.236
REALIZED G/L	0.00	0.000	280.80	0.000	280.80	0.000
BALANCE FORWARD	0.00	0.000	2,048.29	10.370	2,048.29	10.370
EXCHANGE OUT	0.00	0.000	(2,983.42)	(13.287)	(2,983.42)	(13.287)
FEES	0.00	0.000	(7.58)	(0.039)	(7.58)	(0.039)
TOTAL	$0.00	0.000	$3,883.74	18.333	$3,883.74	18.333
ENDING NAV VALUE						$205.30
ENDING MARKET VALUE						$3,763.77

	<-BEGINNING BALANCE-> AS OF 06/19/2022		<------ACTIVITY-----> FROM 06/20/2022 TO 12/31/2022		<---ENDING BALANCE---> AS OF 12/31/2022	
ACCOUNTING ITEM	CASH	SHARES/UNITS	CASH	SHARES/UNITS	CASH	SHARES/UNITS
OL3J THORNBURG STR INC R6						
CONTRIBUTION	0.00	0.000	2,148.38	190.548	2,148.38	190.548
DIVIDEND	0.00	0.000	258.81	23.275	258.81	23.275
INTEREST	0.00	0.000	1.16	0.102	1.16	0.102
EXCHANGE IN	0.00	0.000	4,400.30	396.430	4,400.30	396.430
REALIZED G/L	0.00	0.000	(8.12)	0.000	(8.12)	0.000
BALANCE FORWARD	0.00	0.000	9,650.49	859.349	9,650.49	859.349
LOAN WITHDRAWAL	0.00	0.000	(626.54)	(56.343)	(626.54)	(56.343)
EXCHANGE OUT	0.00	0.000	0.00	0.000	0.00	0.000
FEES	0.00	0.000	(29.84)	(2.706)	(29.84)	(2.706)
LOAN REPAYMENT	0.00	0.000	0.00	0.000	0.00	0.000
INTEREST ON LOAN	0.00	0.000	0.00	0.000	0.00	0.000
TOTAL	$0.00	0.000	$15,794.64	1,410.655	$15,794.64	1,410.655
ENDING NAV VALUE						$11.10
ENDING MARKET VALUE						$15,658.27

ACCOUNTING ITEM	<-BEGINNING BALANCE-> AS OF 06/19/2022 CASH	SHARES/UNITS	<------ACTIVITY-----> FROM 06/20/2022 TO 12/31/2022 CASH	SHARES/UNITS	<---ENDING BALANCE---> AS OF 12/31/2022 CASH	SHARES/UNITS
OO6M FLEXPATH MOD RET R1						
CONTRIBUTION	0.00	0.000	11,532.86	888.537	11,532.86	888.537
INTEREST	0.00	0.000	3.43	0.257	3.43	0.257
REALIZED G/L	0.00	0.000	(2.11)	0.000	(2.11)	0.000
BALANCE FORWARD	0.00	0.000	30,151.48	2,331.902	30,151.48	2,331.902
FEES	0.00	0.000	(88.92)	(7.029)	(88.92)	(7.029)
TOTAL	$0.00	0.000	$41,596.74	3,213.667	$41,596.74	3,213.667
ENDING NAV VALUE						$12.79
ENDING MARKET VALUE						$41,102.81

ACCOUNTING ITEM	<-BEGINNING BALANCE-> AS OF 06/19/2022 CASH	SHARES/UNITS	<------ACTIVITY-----> FROM 06/20/2022 TO 12/31/2022 CASH	SHARES/UNITS	<---ENDING BALANCE---> AS OF 12/31/2022 CASH	SHARES/UNITS
OO6P FLEXPATH MOD 2025 R1						
CONTRIBUTION	0.00	0.000	53,617.61	3,873.558	53,617.61	3,873.558
INTEREST	0.00	0.000	25.78	1.825	25.78	1.825
REALIZED G/L	0.00	0.000	(12.67)	0.000	(12.67)	0.000
BALANCE FORWARD	0.00	0.000	178,563.56	13,158.700	178,563.56	13,158.700
WITHDRAWAL	0.00	0.000	0.00	0.000	0.00	0.000
FEES	0.00	0.000	(541.13)	(40.624)	(541.13)	(40.624)
TOTAL	$0.00	0.000	$231,653.15	16,993.459	$231,653.15	16,993.459
ENDING NAV VALUE						$13.46
ENDING MARKET VALUE						$228,731.96

ACCOUNTING ITEM	<-BEGINNING BALANCE-> AS OF 06/19/2022 CASH	SHARES/UNITS	<------ACTIVITY-----> FROM 06/20/2022 TO 12/31/2022 CASH	SHARES/UNITS	<---ENDING BALANCE---> AS OF 12/31/2022 CASH	SHARES/UNITS
OO6S FLEXPATH MOD 2035 R1						
CONTRIBUTION	0.00	0.000	125,973.54	8,487.648	125,973.54	8,487.648
INTEREST	0.00	0.000	54.06	3.548	54.06	3.548
REALIZED G/L	0.00	0.000	1,837.58	0.000	1,837.58	0.000
BALANCE FORWARD	0.00	0.000	511,500.12	35,058.266	511,500.12	35,058.266
LOAN WITHDRAWAL	0.00	0.000	(514.70)	(34.990)	(514.70)	(34.990)
WITHDRAWAL	0.00	0.000	(14,086.53)	(982.360)	(14,086.53)	(982.360)
EXCHANGE OUT	0.00	0.000	(110,991.52)	(7,435.278)	(110,991.52)	(7,435.278)
FEES	0.00	0.000	(1,294.85)	(89.195)	(1,294.85)	(89.195)
TOTAL	$0.00	0.000	$512,477.70	35,007.639	$512,477.70	35,007.639
ENDING NAV VALUE						$14.65
ENDING MARKET VALUE						$512,861.92

ACCOUNTING ITEM	<-BEGINNING BALANCE-> AS OF 06/19/2022 CASH	SHARES/UNITS	<------ACTIVITY-----> FROM 06/20/2022 TO 12/31/2022 CASH	SHARES/UNITS	<---ENDING BALANCE---> AS OF 12/31/2022 CASH	SHARES/UNITS
OO6V FLEXPATH MOD 2045 R1						
CONTRIBUTION	0.00	0.000	43,101.96	2,745.968	43,101.96	2,745.968
INTEREST	0.00	0.000	16.60	1.031	16.60	1.031
REALIZED G/L	0.00	0.000	(1.26)	0.000	(1.26)	0.000
BALANCE FORWARD	0.00	0.000	153,450.21	10,016.332	153,450.21	10,016.332
FEES	0.00	0.000	(444.64)	(28.964)	(444.64)	(28.964)
LOAN REPAYMENT	0.00	0.000	0.00	0.000	0.00	0.000
INTEREST ON LOAN	0.00	0.000	0.00	0.000	0.00	0.000
TOTAL	$0.00	0.000	$196,122.87	12,734.367	$196,122.87	12,734.367
ENDING NAV VALUE						$15.56
ENDING MARKET VALUE						$198,146.76

ACCOUNTING ITEM	<-BEGINNING BALANCE-> AS OF 06/19/2022 CASH	SHARES/UNITS	<------ACTIVITY-----> FROM 06/20/2022 TO 12/31/2022 CASH	SHARES/UNITS	<---ENDING BALANCE---> AS OF 12/31/2022 CASH	SHARES/UNITS
OO6Y FLEXPATH MOD 2055 R1						
CONTRIBUTION	0.00	0.000	186,625.78	11,657.850	186,625.78	11,657.850
INTEREST	0.00	0.000	52.38	3.208	52.38	3.208
REALIZED G/L	0.00	0.000	1,131.38	0.000	1,131.38	0.000
BALANCE FORWARD	0.00	0.000	467,752.74	30,236.115	467,752.74	30,236.115
LOAN WITHDRAWAL	0.00	0.000	(8,708.23)	(549.853)	(8,708.23)	(549.853)
WITHDRAWAL	0.00	0.000	(39,726.96)	(2,497.472)	(39,726.96)	(2,497.472)
EXCHANGE OUT	0.00	0.000	(16,141.26)	(1,010.396)	(16,141.26)	(1,010.396)
FEES	0.00	0.000	(1,696.82)	(108.679)	(1,696.82)	(108.679)
LOAN REPAYMENT	0.00	0.000	1,746.70	109.950	1,746.70	109.950
INTEREST ON LOAN	0.00	0.000	139.66	8.836	139.66	8.836
TOTAL	$0.00	0.000	$591,175.37	37,849.559	$591,175.37	37,849.559
ENDING NAV VALUE						$15.79
ENDING MARKET VALUE						$597,644.55

ACCOUNTING ITEM	<-BEGINNING BALANCE-> AS OF 06/19/2022 CASH	SHARES/UNITS	<------ACTIVITY-----> FROM 06/20/2022 TO 12/31/2022 CASH	SHARES/UNITS	<---ENDING BALANCE---> AS OF 12/31/2022 CASH	SHARES/UNITS
OYQA JPM LG CAP GROWTH R6						
CONTRIBUTION	0.00	0.000	13,811.75	273.351	13,811.75	273.351
DIVIDEND	0.00	0.000	2,093.52	42.684	2,093.52	42.684
INTEREST	0.00	0.000	2.64	0.052	2.64	0.052
EXCHANGE IN	0.00	0.000	25,142.36	478.481	25,142.36	478.481
REALIZED G/L	0.00	0.000	(22.04)	0.000	(22.04)	0.000
BALANCE FORWARD	0.00	0.000	26,507.71	557.939	26,507.71	557.939
WITHDRAWAL	0.00	0.000	0.00	0.000	0.00	0.000
EXCHANGE OUT	0.00	0.000	(513.80)	(10.475)	(513.80)	(10.475)
FEES	0.00	0.000	(118.19)	(2.386)	(118.19)	(2.386)
LOAN REPAYMENT	0.00	0.000	0.00	0.000	0.00	0.000
INTEREST ON LOAN	0.00	0.000	0.00	0.000	0.00	0.000
TOTAL	$0.00	0.000	$66,903.95	1,339.646	$66,903.95	1,339.646
ENDING NAV VALUE						$46.92
ENDING MARKET VALUE						$62,856.18

IV. SUMMARY OF LOAN ACTIVITY

BEGINNING BALANCE AS OF: 06/19/2022		$4,228.33
PRINCIPAL ACTIVITY		
LESS PRINCIPAL REPAID	(1,746.70)	
SUBTOTAL		($1,746.70)
PLUS LOAN WITHDRAWALS	25,500.00	
SUBTOTAL		$25,500.00
OUTSTANDING PRINCIPAL BALANCE AS OF: 12/31/2022		$27,981.63
INTEREST ACTIVITY		
INTEREST PAYMENTS	139.66	
TOTAL INTEREST		$139.66
TOTAL LOANS OUTSTANDING AS OF 12/31/2022:		3

V. RECONCILIATION

	BEGINNING BALANCE AS OF 06/19/2022 CASH	CURRENT ACTIVITY 06/20/2022 TO 12/31/2022 CASH	ENDING BALANCE AS OF 12/31/2022 CASH
PARTICIPANT TOTALS	$0.00	$1,976,317.23	$1,976,317.23
PLAN TOTALS	$0.00	$1,976,317.23	$1,976,317.23
	$0.00	$0.00	$0.00