

Form 5500 Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Annual Return/Report of Employee Benefit Plan This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code). ▶ Complete all entries in accordance with the instructions to the Form 5500.	OMB Nos. 1210-0110 1210-0089 2024 This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024	
A	This return/report is for: ☐ a multiemployer plan ☒ a multiple-employer plan (Filers checking this box must provide participating employer information in accordance with the form instructions.) ☐ a single-employer plan ☐ a DFE (specify) _____ ☐ the first return/report ☐ the final return/report ☒ an amended return/report ☐ a short plan year return/report (less than 12 months)
C	If the plan is a collectively-bargained plan, check here. ▶ ☐
D	Check box if filing under: ☒ 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 401(K) SIMPLIFIED FLEXIBLE
1b	Three-digit plan number (PN) ▶ 002
1c	Effective date of plan 04/14/2021
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) ADVISORTRUST, INC. 212 S MAIN ST. SUITE 123 SIOUX FALLS, SD 57104
2b	Employer Identification Number (EIN) 46-4091337
2c	Plan Sponsor's telephone number 866-928-9043
2d	Business code (see instructions) 523900

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.	06/18/2026	KELLY DURANTE
	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 ☒ Same as Plan Sponsor	3b Administrator's EIN 3c Administrator's telephone number
4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: a Sponsor's name c Plan Name	4b EIN 4d PN
5 Total number of participants at the beginning of the plan year	5 3843
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d). a(1) Total number of active participants at the beginning of the plan year a(2) Total number of active participants at the end of the plan year b Retired or separated participants receiving benefits c Other retired or separated participants entitled to future benefits d Subtotal. Add lines 6a(2) , 6b , and 6c e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. f Total. Add lines 6d and 6e g(1) Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item) g(2) Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.....	 6a(1) 3289 6a(2) 5085 6b 166 6c 489 6d 5740 6e 3 6f 5743 6g(1) 2298 6g(2) 3259 6h 108
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7

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

2A 2E 2J 2K 2F 2G 2S 2T 2W 3D

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

9a Plan funding arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor	9b Plan benefit arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor
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10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)

a Pension Schedules

- (1) ☒ **R** (Retirement Plan Information)
- (2) ☐ **MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary
- (3) ☐ **SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary
- (4) ☐ **DCG** (Individual Plan Information) – Number Attached _____
- (5) ☒ **MEP** (Multiple-Employer Retirement Plan Information)

b General Schedules

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

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

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

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

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

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

Receipt Confirmation Code _____

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

For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024		
A Name of plan 401(K) SIMPLIFIED FLEXIBLE	B Three-digit plan number (PN) ▶	002
C Plan sponsor's name as shown on line 2a of Form 5500 ADVISORTRUST, INC.	D Employer Identification Number (EIN) 46-4091337	

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

- a Check "Yes" or "No" to indicate whether you are excluding a person from the remainder of this Part because they received only eligible indirect compensation for which the plan received the required disclosures (see instructions for definitions and conditions).. ☐ Yes ☒ No
- b If you answered line 1a "Yes," enter the name and EIN or address of each person providing the required disclosures for the service providers who received only eligible indirect compensation. Complete as many entries as needed (see instructions).

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

SOLTIS INVESTMENT ADVISORS, LLC

20 N MAIN ST STE 400
SAINT GEORGE, UT 84770

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
26 27 28	INVESTMENT ADVISORY	400164	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

PCS RETIREMENT LLC

23-3038464

(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?
13 15 16 17 36 37 38 64	CONTRACT ADMINISTRATOR	112486	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

DECISIONPOINT FINANCIAL, LLC

2812 N NORWALK STE 116
MESA, AZ 85215

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
26 27 28	INVESTMENT ADVISORY	22820	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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)

FORUM FINANCIAL MANAGEMENT, LP

1900 S HIGHLAND AVE STE 100
LOMBARD, IL 60148

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
26 27 28	INVESTMENT ADVISORY	17598	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 ☐

(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:	COHNREZNICK, LLP	b EIN:	33-4144829
c Position:	AUDITOR		
d Address:	350 CHURCH ST. HARTFORD, CT 06103	e Telephone:	959-200-7000

Explanation: THE PLAN SPONSOR ELECTED TO CENTRALIZE MOST OF ITS POOLED EMPLOYER PLAN AUDITS WITH THE SAME AUDIT FIRM.

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) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration	DFE/Participating Plan Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 2024 This Form is Open to Public Inspection.
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024		
A Name of plan 401(K) SIMPLIFIED FLEXIBLE	B Three-digit plan number (PN) ▶	002
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 ADVISORTRUST, INC.	D Employer Identification Number (EIN) 46-4091337	

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: SIA BALANCED CONSERVATIVE			
b Name of sponsor of entity listed in (a): ALTA TRUST COMPANY			
c EIN-PN 83-1527285-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 190724	
a Name of MTIA, CCT, PSA, or 103-12 IE: SIA BALANCED GROWTH			
b Name of sponsor of entity listed in (a): ALTA TRUST COMPANY			
c EIN-PN 83-1482059-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 80101	
a Name of MTIA, CCT, PSA, or 103-12 IE: SIA BALANCED MODERATE			
b Name of sponsor of entity listed in (a): ALTA TRUST COMPANY			
c EIN-PN 83-1512343-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 369039	
a Name of MTIA, CCT, PSA, or 103-12 IE: SIA DIVERSIFIED BOND			
b Name of sponsor of entity listed in (a): ALTA TRUST COMPANY			
c EIN-PN 83-3084851-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 114471	
a Name of MTIA, CCT, PSA, or 103-12 IE: SIA GLOBAL GROWTH			
b Name of sponsor of entity listed in (a): ALTA TRUST COMPANY			
c EIN-PN 83-1466030-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 531387	
a Name of MTIA, CCT, PSA, or 103-12 IE: SIA INCOME GROWTH			
b Name of sponsor of entity listed in (a): ALTA TRUST COMPANY			
c EIN-PN 83-1580447-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 6330	
a Name of MTIA, CCT, PSA, or 103-12 IE: SIA LARGE CAP GROWTH			
b Name of sponsor of entity listed in (a): ALTA TRUST COMPANY			
c EIN-PN 83-1419179-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 87670	

a Name of MTIA, CCT, PSA, or 103-12 IE: SIA TARGET DATE 2020		
b Name of sponsor of entity listed in (a): ALTA TRUST COMPANY		
c EIN-PN 83-1273151-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 176695
a Name of MTIA, CCT, PSA, or 103-12 IE: SIA TARGET DATE 2025		
b Name of sponsor of entity listed in (a): ALTA TRUST COMPANY		
c EIN-PN 83-1286100-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 745769
a Name of MTIA, CCT, PSA, or 103-12 IE: SIA TARGET DATE 2030		
b Name of sponsor of entity listed in (a): ALTA TRUST COMPANY		
c EIN-PN 83-1300171-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1749161
a Name of MTIA, CCT, PSA, or 103-12 IE: SIA TARGET DATE 2035		
b Name of sponsor of entity listed in (a): ALTA TRUST COMPANY		
c EIN-PN 83-1318731-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1852654
a Name of MTIA, CCT, PSA, or 103-12 IE: SIA TARGET DATE 2040		
b Name of sponsor of entity listed in (a): ALTA TRUST COMPANY		
c EIN-PN 83-1335569-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1506460
a Name of MTIA, CCT, PSA, or 103-12 IE: SIA TARGET DATE 2045		
b Name of sponsor of entity listed in (a): ALTA TRUST COMPANY		
c EIN-PN 83-1358106-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1228542
a Name of MTIA, CCT, PSA, or 103-12 IE: SIA TARGET DATE 2050		
b Name of sponsor of entity listed in (a): ALTA TRUST COMPANY		
c EIN-PN 83-1373905-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 889535
a Name of MTIA, CCT, PSA, or 103-12 IE: SIA TARGET DATE 2055		
b Name of sponsor of entity listed in (a): ALTA TRUST COMPANY		
c EIN-PN 83-1392402-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 454324
a Name of MTIA, CCT, PSA, or 103-12 IE: SIA TARGET DATE 2060		
b Name of sponsor of entity listed in (a): ALTA TRUST COMPANY		
c EIN-PN 83-1401342-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 376680
a Name of MTIA, CCT, PSA, or 103-12 IE: MORLEY STABLE VALUE FUND		
b Name of sponsor of entity listed in (a): PRINCIPAL GLOBAL INVESTORS TRUST COMPANY		
c EIN-PN 93-6274329-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 4054

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

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

c EIN-PN 86-3914399-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 108342
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a Name of MTIA, CCT, PSA, or 103-12 IE: **INTELLICENTS MODERATE CIF**

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

c EIN-PN 86-3956341-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 113912
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a Name of MTIA, CCT, PSA, or 103-12 IE: **INTELLICENTS MODERATELY CONSERVATIV**

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

c EIN-PN 86-3883297-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 108342
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a Name of MTIA, CCT, PSA, or 103-12 IE: **INTELLICENTS AGGRESSIVE CIF**

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

c EIN-PN 87-0860881-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 72121
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a Name of MTIA, CCT, PSA, or 103-12 IE: **INTELLICENTS CONSERVATIVE CIF**

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

c EIN-PN 86-3974282-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 32521
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a Name of MTIA, CCT, PSA, or 103-12 IE: **INTELLICENTS PRESERVATION CIF**

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

c EIN-PN 86-3712906-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 3883
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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)
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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)
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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)
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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)
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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 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
		2024
		This Form is Open to Public Inspection

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

A Name of plan 401(K) SIMPLIFIED FLEXIBLE	B Three-digit plan number (PN) 002
C Plan sponsor's name as shown on line 2a of Form 5500 ADVISORTRUST, INC.	D Employer Identification Number (EIN) 46-4091337

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	48894	63433
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	1212202	1382184
(2) Participant contributions.....	1b(2)	332093	379867
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	683380	3689470
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)	964654	1702048
(9) Value of interest in common/collective trusts	1c(9)	9329316	10977444
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	62562348	140367542
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(15) Other.....	1c(15)	408563	575048

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities.....	1d(1)		
(2) Employer real property.....	1d(2)		
e Buildings and other property used in plan operation.....	1e		
f Total assets (add all amounts in lines 1a through 1e).....	1f	75541450	159137036
Liabilities			
g Benefit claims payable.....	1g		
h Operating payables.....	1h		
i Acquisition indebtedness.....	1i		
j Other liabilities.....	1j	12288	25861
k Total liabilities (add all amounts in lines 1g through 1j).....	1k	12288	25861
Net Assets			
l Net assets (subtract line 1k from line 1f).....	1l	75529162	159111175

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)	7536691	
(B) Participants.....	2a(1)(B)	11148306	
(C) Others (including rollovers).....	2a(1)(C)	1093087	
(2) Noncash contributions.....	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B), (C), and line 2a(2)	2a(3)		19778084
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit).....	2b(1)(A)		
(B) U.S. Government securities.....	2b(1)(B)		
(C) Corporate debt instruments.....	2b(1)(C)		
(D) Loans (other than to participants).....	2b(1)(D)		
(E) Participant loans.....	2b(1)(E)	81635	
(F) Other.....	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F).....	2b(1)(G)		81635
(2) Dividends: (A) Preferred stock.....	2b(2)(A)		
(B) Common stock.....	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds).....	2b(2)(C)	4351483	
(D) Total dividends. Add lines 2b(2)(A) , (B), and (C).....	2b(2)(D)		4351483
(3) Rents.....	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds.....	2b(4)(A)		
(B) Aggregate carrying amount (see instructions).....	2b(4)(B)		
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result.....	2b(4)(C)		
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate.....	2b(5)(A)		
(B) Other.....	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B).....	2b(5)(C)		

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		8862237
c Other income	2c		
d Total income. Add all income amounts in column (b) and enter total	2d		33073439

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	12426882	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)		
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		12426882
f Corrective distributions (see instructions)	2f		0
g Certain deemed distributions of participant loans (see instructions)	2g		133849
h Interest expense	2h		
i Administrative expenses:			
(1) Salaries and allowances	2i(1)		
(2) Contract administrator fees	2i(2)	112808	
(3) Recordkeeping fees	2i(3)		
(4) IQPA audit fees	2i(4)		
(5) Investment advisory and investment management fees	2i(5)	446744	
(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)		
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		559552
j Total expenses. Add all expense amounts in column (b) and enter total	2j		13120283

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		19953156
l Transfers of assets:			
(1) To this plan	2l(1)		63628857
(2) From this plan	2l(2)		

Part III Accountant's Opinion

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

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

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

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

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

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

(1) Name: **DOEREN MAYHEW ASSURANCE**

(2) EIN: **38-2492570**

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.)	☒	☐	2526076
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.)	☐	☒	
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.)	☐	☒	
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.)	☐	☒	
e Was this plan covered by a fidelity bond?	☒	☐	2000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	☐	☒	
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?	☐	☒	
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?	☐	☒	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	☒	☐	
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.)	☐	☒	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	☐	☒	
l Has the plan failed to provide any benefit when due under the plan?	☐	☒	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	☒	☐	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	☒	☐	

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

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

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

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

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

SCHEDULE R (Form 5500) 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 2024 This Form is Open to Public Inspection.	
For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024					
A Name of plan 401(K) SIMPLIFIED FLEXIBLE				B Three-digit plan number (PN) ▶	002
C Plan sponsor's name as shown on line 2a of Form 5500 ADVISORTRUST, INC.				D Employer Identification Number (EIN) 46-4091337	
Part I Distributions					
All references to distributions relate only to payments of benefits during the plan year.					
1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....				1	0
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): 82-3967259					
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					
For Paperwork Reduction Act Notice, see the Instructions for Form 5500.				Schedule R (Form 5500) 2024 v. 240311	

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 06 / 30 / 2020 (MM/DD/YYYY) and the Opinion Letter serial number Q704096A.

SCHEDULE MEP (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration	MULTIPLE-EMPLOYER RETIREMENT PLAN 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 2024 This Form is Open to Public Inspection
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024		
A Name of plan 401(K) SIMPLIFIED FLEXIBLE	B Three-digit Plan number (PN)..... ►	002
C Plan administrator's name as shown on line 3a of Form 5500/Form 5500-SF ADVISORTRUST, INC.	D Administrator's EIN 46-4091337	

Part I	Type of Multiple-Employer Pension Plan. All multiple-employer pension plans must complete.
--------	--

1 Check the appropriate box to indicate type of multiple-employer pension plan. (Only defined contribution plans may check lines 1a, 1b, and 1c. Defined benefit plans and defined contribution plans not checking lines 1a, 1b, or 1c should check line 1d. See Instructions).

a ☐ association retirement plan (See 29 CFR 2510.3-55) (Complete Part II)

b ☐ professional employer organization plan (PEO Plan) (See 29 CFR 29 CFR 2510.3-55) (Complete Part II)

c ☒ pooled employer plan (PEP) (See 29 CFR 2510.3-44) (Complete Parts II and III)

d ☐ other multiple-employer pension plan (Describe) _____ (Complete Part II)

Part II	Participating Employer Information.
---------	-------------------------------------

2 All multiple-employer pension plans that are subject to section 210(a) of ERISA (see instructions for filing the Form 5500) must complete Part II, in addition to Part I, in accordance with the instructions, to report the information for each employer participating in the multiple-employer pension plan. Defined contribution plans must complete lines 2a-2d. All other multiple-employer pension plans complete lines 2a-2c only. Complete as many entries as needed to list the required information for each participating employer that is not an individual person (see instructions).

2a Name of Participating Employer 5071, INC	2b EIN 47-1042946	2c Percentage of Total Contributions for the Plan Year 1.02	2d Aggregate Account Balances Attributable to Participating Employer 759931
2a Name of Participating Employer ACCENT AUTOMATICS ENTRANCE SOLUTIONS INC	2b EIN 83-1677253	2c Percentage of Total Contributions for the Plan Year 0.18	2d Aggregate Account Balances Attributable to Participating Employer 427520

CAUTION Do not individually list information for working owners (see instructions and 29 CFR 2510.3-55(d)(2)) or other individuals who are participants or beneficiaries in the plan or arrangement that are no longer associated with a particular participating employer or participating employer plan (see instructions). Providing identifying information for individuals may result in rejection of this filing. If there are any such individuals in the plan, answer "Yes" to line 2e and provide the total information for all such individuals, without providing names or other identifying information.

2e Does the plan include any individuals not participating through an employer or who are individual working owners?	2e	☐ Yes ☒ No
2f If you answer "Yes" in line 2e, enter a good faith estimate of the percentage of total contributions made by all such individuals that are not listed on line 2a during the plan year.	2f	
2g If you answer "Yes" in Line 2e, enter the aggregate account balances for all such individuals that are not listed on line 2a.	2g	

Part II Participating Employer Information (Continued).

Use this page for additional participating employer information.

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Defined contribution plans must complete lines 2a-2d. All other multiple-employer pension plans complete lines 2a-2c only. Complete as many entries as needed to list the required information for each participating employer that is not an individual person (see instructions).

2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ALDER CONSTRUCTION COMPANY	87-0272033	0.74	4153858
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ALL PRO ELECTRIC, INC.	87-0447851	0.67	2007642
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ATLANTIC SERVICES GROUP INC	36-4234088	0.08	1496545
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
AVTECH CAPITAL LLC	77-0591208	4.64	6642223
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
B. JACKSON INFRASTRUCTURE SERVICES	84-1377400	11.48	7478510
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
BALANCE OF NATURE	27-3098597	2.51	1
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
BLACKROCK MICROSYSTEMS, LLC	26-2659394	6.46	6877086
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
BORBOLETA BEAUTY	27-3170841	0.15	94517
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
BROKEN ARROW INCORPORATED	87-0302821	3.42	9812727

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Part II Participating Employer Information (Continued).

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
BUILDRIGHT COMPANIES LLC	33-1885924	4.89	1084566
BUILDING CONTROL SYSTEMS, LLC	03-0591959	0.06	257443
CANYON POINT CONSTRUCTION, INC.	20-1564259	0.03	619518
CERTIFIED SOLUTIONS, LLC	83-2697501	0.19	1934997
CHADLEY MANAGEMENT INC.	83-2933627	0.00	2
CHRISTIAN ALEXANDER, D.M.D., P.L.L.C. - DURSTIN W. HOOPER PLLC	92-0592213	0.00	0
COMMUNITY TREATMENT ALTERNATIVES	87-0424951	3.79	6374888
CRC CONSTRUCTION INC	87-0341766	0.11	531556
CYCLONE BUSINESS SERVICES INC.	82-3053971	0.15	45036

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
DDRM PARTNERS	47-4481127	0.63	590321
2a Name of Participating Employer DESERET LABORATORIES, INC.	87-0476826	1.11	2519562
2a Name of Participating Employer DESERT SHORES DENTISTRY, PLLC	20-1262688	0.36	1692717
2a Name of Participating Employer DIGITAL RESPON-ABILITY LLC	81-1708005	0.02	55249
2a Name of Participating Employer ENT SPECIALISTS, LLC	87-0354540	0.41	5574093
2a Name of Participating Employer EPPERSON & OWENS, P.C.	26-4050626	0.42	2746423
2a Name of Participating Employer EXTREME EXCAVATING AND LANDSCAPING INC	87-0475298	0.09	75547
2a Name of Participating Employer FABMATICS USA INC.	20-5361308	0.37	682560
2a Name of Participating Employer FIRST CITY INVESTORS INC	87-0466539	0.17	537532

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
G2G PROTEIN BAR	27-3091591	0.57	524140
GLOBAL SERVICES	26-1514667	0.22	1049285
GORGOSA MUTUAL WATER COMPANY	87-0455698	0.13	1103574
HIGH END FINANCIAL	46-2060674	0.19	83669
HOLBROOK ASPHALT, LLC	87-0626583	2.48	2595403
HOLMES HEATING AND COOLING, INC.	87-0371981	0.26	257525
HOMESTAR WINDOWS & DOORS	27-3168976	0.13	407951
IGES INGENIEROS, LLC DBA GEOSTRATA	87-0641934	0.41	2419731
INTEGRATED TITLE INSURANCE SERVICES	33-1025101	0.13	2902196

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
J&P BERRY CONSTRUCTION AND SERVICES LLC	13-4295737	0.04	462043
JARED C CONDIE DMD & BRIAN L TUFT DMD LC	87-0503103	0.29	207404
JEFFREY D. HYDE, DDS MSD PC	61-1582067	0.03	850324
JENSEN ORTHODONTICS	87-0578136	0.10	764618
JONES PAINT & GLASS	87-0232828	6.90	18835672
KEENAN SEWER & WATER, LLC	47-1703707	0.30	196499
KODIAK BUILDERS, INC.	90-0200418	0.10	466212
KOMBEA CORPORATION	56-2375624	0.26	464517
LATIMER PLASTERING LLC	56-2457051	0.00	637367

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
LAUNCH POINT	83-4291576	0.04	8248
2a Name of Participating Employer LEC CABINETS, LLC	2b EIN 20-3602486	2c Percentage of Total Contributions for the Plan Year 0.14	2d Aggregate Account Balances Attributable to Participating Employer 247105
2a Name of Participating Employer MBA ENERGY & INDUSTRIAL LLC DBA MBA CONSTRUCTION CO.	2b EIN 26-0721416	2c Percentage of Total Contributions for the Plan Year 2.89	2d Aggregate Account Balances Attributable to Participating Employer 5577182
2a Name of Participating Employer MECHANICAL PRODUCTS NSW	2b EIN 54-2122702	2c Percentage of Total Contributions for the Plan Year 1.06	2d Aggregate Account Balances Attributable to Participating Employer 5563120
2a Name of Participating Employer MICHAEL WILKINSON DDS, DBA CACHE VALL	2b EIN 45-2532371	2c Percentage of Total Contributions for the Plan Year 0.13	2d Aggregate Account Balances Attributable to Participating Employer 0
2a Name of Participating Employer NAMIFY	2b EIN 87-0676537	2c Percentage of Total Contributions for the Plan Year 2.72	2d Aggregate Account Balances Attributable to Participating Employer 2531579
2a Name of Participating Employer NORTHWESTERN BAND OF THE SHOSHONE NATION	2b EIN 83-0273501	2c Percentage of Total Contributions for the Plan Year 0.38	2d Aggregate Account Balances Attributable to Participating Employer 1166627
2a Name of Participating Employer OFFROAD SUPPLY LLC	2b EIN 47-3250924	2c Percentage of Total Contributions for the Plan Year 0.14	2d Aggregate Account Balances Attributable to Participating Employer 652055
2a Name of Participating Employer PATTERSON HOMES, LLC	2b EIN 47-2073054	2c Percentage of Total Contributions for the Plan Year 0.40	2d Aggregate Account Balances Attributable to Participating Employer 1399306

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PLANT MANUFACTURING & LAB, LLC	84-4196788	0.16	141521
PREMIER HEALTH	27-3098597	0.10	2
PREMIUM PRODUCTION	47-1478728	0.39	1
PRIME MACHINE, INC.	87-0351334	2.75	4279172
QUINEX ENERGY CORPORATION	87-0411828	0.08	298956
RAINBOW INTERNATIONAL OF TACOMA AND PUYALLUP	26-3267302	0.00	0
REDWOOD ENDODONTICS, PC	87-0308946	0.28	1302286
ROADWAY MANAGEMENT SERVICES, LLC	85-3651313	0.65	714055
ROCKY MOUNTAIN INFRASTRUCTURE, LLC	45-3863219	0.01	294039

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ROY PHARMACY GROUP	83-3568735	0.05	360041
SALMON ELECTRIC	87-0493963	2.46	2722783
SALMON HVAC	81-3310668	0.08	471500
SALMON MECHANICAL	90-0489320	0.41	970551
SCOTT SCHOFIELD CONSTRUCTION INC.	87-0592089	0.13	224312
SHIP IT	47-2053840	0.16	4
SHUPE ELECTRIC INC	87-0505260	0.22	1404156
SMART INSURANCE	46-2447696	0.00	279017
SMITH BOWMAN OPHTHALMOLOGY	26-3720511	0.15	599002

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SPANAWAY WATER COMPANY	91-6055017	1.05	0
STAT-MD LLC	47-3099769	0.03	118796
STRATA INFORMATION GROUP, INC.	33-0278391	20.68	9806958
SUNSET MOUNTAIN MACHINERY LLC	03-0472499	0.45	602906
SUPPLY LINK	93-3459080	0.17	0
SYNERGYSUITE	46-2905057	1.26	1224741
TERRAWORKS INC.	05-0544513	0.26	571233
TRANSWEST CREDIT UNION	87-0212887	0.76	3596624
TRUVISION HEALTH LLC	46-4085422	0.61	2234259

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
UNITED WE PLEDGE	87-2011577	0.13	2
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
UNIVERSAL ACCOUNTING CENTER INC.	87-0470173	0.00	618780
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
UTAH ASSOCIATION OF CERTIFIED PUBLIC ACCOUNTANTS	87-6127438	0.19	783441
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
UTAH GOLF ASSOCIATION	87-0271572	0.06	384223
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
WARNER & ASSOCIATES CONSTRUCTION	27-3729082	0.22	364078
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
WATTS AUTOMOTIVE CORP	87-0687045	0.38	3473940
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
WEIDNER & ASSOCIATES, INC.	87-0284314	0.04	1535865
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
WHITE ELEGANCE	87-0520893	0.04	443295
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
WHITE PEAK DENTAL	88-4062316	0.14	207231

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2a Name of Participating Employer WINN & ASSOCIATES, LLC	2b EIN 20-0460570	2c Percentage of Total Contributions for the Plan Year 0.03	2d Aggregate Account Balances Attributable to Participating Employer 6840
2a Name of Participating Employer YOGA DESIGN LAB, INC. DBA HUGGER MUGGER YOGA PRODUCTS	2b EIN 84-3446522	2c Percentage of Total Contributions for the Plan Year 0.02	2d Aggregate Account Balances Attributable to Participating Employer 426705
2a Name of Participating Employer YOUNGBERG HEATING & COOLING	2b EIN 82-0520572	2c Percentage of Total Contributions for the Plan Year 0.62	2d Aggregate Account Balances Attributable to Participating Employer 345483
2a Name of Participating Employer ZENNIHOME LLC	2b EIN 86-3540361	2c Percentage of Total Contributions for the Plan Year 0.15	2d Aggregate Account Balances Attributable to Participating Employer 123375
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
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Part III	Pooled Employer Plan Information
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Line 3. All Pooled employer plans must answer all of the questions in Part III, in addition to completing all of Parts I and II.

3a Is the pooled plan provider (identified as the plan sponsor and administrator in Part II of the Form 5500) currently in compliance with the Form PR (Pooled Plan Provider Registration Statement) requirements? (See instructions and 29 CFR 2510.3-44)..... ☒ Yes ☐ No

3b If line 3a is "Yes", enter the ACK ID for the most recent Form PR that was required to be filed under the Form PR filing requirements. (Failure to enter a valid ACK ID will subject the Form 5500 filing to rejection as incomplete.)

ACK ID R27HEXPC2



401(k) SIMPLIFIED FLEXIBLE

FINANCIAL STATEMENTS

DECEMBER 31, 2024 AND 2023

(With Independent Auditor's Report Thereon)

401(k) SIMPLIFIED FLEXIBLE

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Notes to Financial Statements	7
SUPPLEMENTAL INFORMATION *	
Form 5500, Schedule H, Line 4a - Schedule of Delinquent Participant Contributions	17
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* Other schedules required by 29 CFR 2520.103-10 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA have been omitted because they are not applicable.	

INDEPENDENT AUDITOR'S REPORT

To the Plan Administrator
401(k) Simplified Flexible

Scope and Nature of the ERISA Section 103(a)(3)(C) Audit for the 2024 Financial Statements

We have performed an audit of the financial statements of the 401(k) Simplified Flexible, an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), as permitted by ERISA Section 103(a)(3)(C) (ERISA Section 103(a)(3)(C) audit). The financial statements comprise the statements of net assets available for benefits as of December 31, 2024, and the related statement of changes in net assets available for benefits for the year then ended, and the related notes to the financial statements (2024 Financial Statements).

Management, having determined it is permissible in the circumstances, has elected to have the audit of the 2024 financial statements performed in accordance with ERISA Section 103(a)(3)(C) pursuant to 29 CFR 2520.103-8 of the Department of Labor's 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 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, 2024, stating that the certified investment information, as described in Note 3 to the financial statements, is complete and accurate.

Opinion on the 2024 Financial Statements

In our opinion, based on our audit and on the procedures performed as described in the Auditor's Responsibilities for the Audit of the 2024 Financial Statements section:

- The amounts and disclosures in the accompanying 2024 financial statements, other than those agreed to or derived from the certified investment information, are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America.
- The information in the accompanying 2024 financial statements related to assets held by and certified by a qualified institution agrees to, or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).

Basis for Opinion on the 2024 Financial Statements

We conducted our audit in accordance with auditing standards generally accepted in the United States of America (GAAS). Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the 2024 Financial Statements section of our report. We are required to be independent of the 401(k) Simplified Flexible and to meet our ethical responsibilities in accordance with the ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our ERISA Section 103(a)(3)(C) audit opinion.

Responsibilities of Management for the 2024 Financial Statements

Management is responsible for the preparation and fair presentation of the 2024 financial statements in accordance with accounting principles generally accepted in the United States 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 2024 financial statements.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about the 401(k) Simplified Flexible's ability to continue as a going concern for one year after the 2024 financial statements are issued.

Management is also responsible for maintaining a current plan instrument, including all plan amendments, administering the Plan, and determining that the Plan's transactions that are presented and disclosed in the 2024 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 2024 Financial Statements

Except as described in the Scope and Nature of the ERISA Section 103(a)(3)(C) Audit for the 2024 Financial Statements section of our report, our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an 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 2024 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 2024 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 2024 financial statements.

- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the 401(k) Simplified Flexible'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 2024 financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the 401(k) Simplified Flexible'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 2024 financial statements, and reading the disclosures relating to the certified investment information to assess whether they are in accordance with the presentation and disclosure requirements of accounting principles generally accepted in the United States of America.

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

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

Other Matter – 2024 Supplemental Schedules Required by ERISA

The supplemental schedules of delinquent participant contributions for the year ended December 31, 2024 and assets (held at end of year) as of December 31, 2024 are presented for purposes of additional analysis and are not a required part of the 2024 financial statements, but are supplemental 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 2024 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 2024 financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the 2024 financial statements or to the 2024 financial statements themselves, and other additional procedures in accordance with 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 its form and content, is presented in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

In our opinion:

- The form and content of the supplemental 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 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).

Auditor's Report on the 2023 Financial Statements

Predecessor auditors performed an audit of the 2023 financial statements of the 401(k) Simplified Flexible. In accordance with ERISA Section 103(a)(3)(C) pursuant to CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA, the prior year audit did not extend to any statements or information related to assets held for investment of the Plan that were certified by a qualified institution. Their report dated December 29, 2025 indicated that: (a) the amounts and disclosures in the 2023 financial statements, other than those agreed to or derived from the certified investment information, were presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America, and (b) the information in the 2023 financial statements related to assets held by and certified 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). Their report also indicated that the form and content of the 2023 supplemental schedule, other than the information in the 2023 supplemental schedule that agreed to or is derived from the certified investment information, were presented, in all material respects, in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA; and the information in the 2023 supplemental schedule related to assets held by and certified by a qualified institution agrees to, or is derived from, in all material respects, the information prepared and certified by an institution that management determines meets the requirements of ERISA Section 103(a)(3)(C).

Doeren Mayhew Assurance

Troy, Michigan
June 12, 2026

401(k) SIMPLIFIED FLEXIBLE

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS DECEMBER 31, 2024 AND 2023

	<u>2024</u>	<u>2023</u>
Assets		
Noninterest-bearing cash	\$ 63,433	\$ 48,894
Investments, at fair value		
Exchange traded funds	329,309	291,221
Mutual funds	140,038,233	62,271,127
Self-directed brokerage accounts	575,048	408,563
Interest-bearing cash	3,689,470	683,380
Common/collective trust funds	10,973,390	9,326,578
Stable value fund	<u>4,054</u>	<u>2,738</u>
Total investments, at fair value	155,609,504	72,983,607
Contributions receivable		
Participant contributions receivable	379,867	332,093
Employer contributions receivable	<u>1,382,184</u>	<u>1,212,202</u>
Total contributions receivable	1,762,051	1,544,295
Notes receivable from participants	<u>1,702,048</u>	<u>964,654</u>
Total assets	159,137,036	75,541,450
Liabilities		
Due to broker	<u>25,861</u>	<u>12,288</u>
Net assets available for benefits	<u>\$ 159,111,175</u>	<u>\$ 75,529,162</u>

See accompanying notes to financial statements

401(k) SIMPLIFIED FLEXIBLE

STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS YEAR ENDED DECEMBER 31, 2024

Additions	
Investment income	
Net appreciation in fair value of investments	\$ 8,862,237
Investment income - interest and dividend income	<u>4,351,483</u>
Total investment income	13,213,720
Interest income - notes receivable from participants	81,635
Contributions	
Participants	11,148,306
Employers	7,536,691
Rollovers	<u>1,093,087</u>
Total contributions	<u>19,778,084</u>
Total additions	33,073,439
Deductions	
Distributions to participants	12,560,731
Administrative fees	<u>559,552</u>
Total deductions	<u>13,120,283</u>
Net increase in assets	19,953,156
Transfer of assets from other plans	63,628,857
Net assets available for benefits - January 1, 2024	<u>75,529,162</u>
Net assets available for benefits - December 31, 2024	<u><u>\$ 159,111,175</u></u>

See accompanying notes to financial statements

401(k) SIMPLIFIED FLEXIBLE

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2024 AND 2023

Note 1 – Description of the Plan

The following description of 401(k) Simplified Flexible (the “Plan”) provides only general information. Detailed information including vesting, allocation, forfeiture provisions, participant and employer contributions and eligibility has been provided in the plan agreement and individual adoption agreement (also referred to as “participation agreement”) for each participating employer.

General

The Plan is a pooled employer plan (PEP) that was established on April 14, 2021 by AdvisorTrust, Inc. (the “Pooled Plan Provider” or otherwise known as the “PPP”). The PEP was established under the Setting Every Community Up for Retirement Enhancement Act of 2019 (SECURE Act) on January 1, 2021. The PEP is a defined contribution profit sharing plan covering eligible employees of the participating employers and is intended to qualify under the Internal Revenue Code of 1986, as amended, Code Sections 401(a) and 501(a). The PEP is intended to constitute a multiple employer plan, as described under Code Sections 410(a), 411, 413 and 415.

The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974, as amended (ERISA). The following description of the Plan is provided for general information purposes only. Participants should refer to the Summary Plan Description or the Adoption Agreement, including amendments thereto, for a complete description of the Plan’s general provisions. All participating employers of this multiple employer plan have signed adoption agreements that enable them to accept or modify the elections of a master plan document to meet their needs. Each participating employer retains the right to terminate their participation within the Plan, in whole or in part, to temporarily or permanently suspend its liability to make contributions to the Plan, to the extent that it relates to that participating employer and its employees.

Administration

The Plan Sponsor and Plan Administrator is AdvisorTrust, Inc. The Plan Administrator is responsible for oversight of the Plan. Per the terms of the PPP’s master service agreement, the participating employers are responsible for creating their own investment committee which is then responsible for determining the appropriateness of the Plan’s investment offerings, monitoring investment performance and fees, and reporting to the Plan’s Trustee. The Plan’s Trustee is AdvisorTrust, Inc. The Plan’s Investment Custodians are AdvisorTrust, Inc. and Charles Schwab Trust Bank. The Investment Custodians hold all of the Plan’s assets and executes all of the Plan’s transactions. The Plan Sponsor has also retained PCS Retirement, LLC to provide participant recordkeeping and administration services.

Eligibility

Only employees specifically designated as eligible by their participating employer in its adoption agreement have the eligibility to participate in the PEP. Participating employers may define eligibility requirements based on factors such as age, service or employee type. Participants are eligible to make contributions and receive participating employer contributions to the extent specified in the applicable adoption agreement or otherwise provided by the PEP.

401(k) SIMPLIFIED FLEXIBLE

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2024 AND 2023

Contributions to the Plan

Each year eligible participants may make pre-tax and/or Roth contributions of their eligible compensation, as defined by the PEP and each participating employer's adoption agreement through payroll withholdings. Participants who have attained age 50 before the end of the year are eligible to make additional 'catch-up' contributions. Participants may also contribute amounts representing distributions from other defined contribution plans (rollovers). However, the Plan Administrator reserves the right to refuse acceptance of any rollover which might affect the status of the Plan.

Participating employer contributions in the accompanying financial statements represent the discretionary matching and non-elective contributions made by participating employers of the PEP, in accordance with the adoption agreement of each participating employer.

Participants direct the investment of both their individual contributions plus their share of employer contributions into various investment options offered by the Plan. The participating employers' contributions are allocated in the same manner as that of the participants' elective contributions.

Contributions are subject to certain Internal Revenue Service (IRS) limitations.

Participant Accounts

Each participant's account is credited with the participant's contributions and employer contributions as well as plan earnings. Participant accounts are charged with an allocation of administrative expenses that are paid by the Plan. Allocations are based on participant earnings, 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 account.

Notes Receivable from Participants

Participants may borrow from their fund accounts a minimum of \$1,000 up to a maximum of the lesser of \$50,000 or 50% of their vested account balance, subject to certain Department of Labor and IRS requirements. The loans are secured by the balance in the participant's account and bear interest at a rate equal to the prime rate, plus 1%, as defined in the plan document. Principal and interest is paid ratably through payroll deductions each pay period.

Payment of Benefits

On termination of service, participants with vested account balances greater than \$5,000 may elect to receive a lump sum distribution, installment payments or rollover their account balance to another qualified account. Those participants whose account balances exceed \$5,000 may also elect to defer the distribution of their plan balance. Participants 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 employer contributions. Special rules apply to distributions due to death, disability, and retirement. Participants should refer to the full plan document for details.

401(k) SIMPLIFIED FLEXIBLE

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2024 AND 2023

On termination of service, participant account balances that do not exceed \$5,000 will automatically be rolled over into an individual retirement plan determined by the Plan Sponsor unless the participant affirmatively elects otherwise.

Certain amounts may be withdrawn prior to termination of service upon attainment of age 59 1/2, or due to financial hardship, as defined by the adoption agreement of each participating employer. Specific rules apply to distributions due to death, disability, and retirement. Participants should refer to the full plan document for details.

Vesting

Participants are vested immediately in their contributions plus actual earnings thereon. Each participating employer provides for different vesting of employer contributions, as described in each participating employer's adoption agreement. Participants also become 100% vested upon death, disability, or attainment of normal retirement age.

Forfeitures

Forfeitures can be used to reduce employer contributions and offset plan administration expenses. Unallocated forfeiture balances as of December 31, 2024 and 2023 were \$479,718 and \$151,564, respectively. Forfeitures of \$86,847 were used to reduce employer contributions during the year ended December 31, 2024. Forfeitures of \$8,132 were used to offset plan administrative expenses during the year ended December 31, 2024.

Transfer of Assets

Upon termination or new entrance of a participating employer, funds may be transferred to or from other qualified plans.

During the year ended December 31, 2024, various employers signed participation agreements to become participating employers in the Plan. A transfer in of assets from the predecessor plans totaling approximately \$63,600,000 was recorded in the accompanying statement of changes in net assets available for benefits for the year ended December 31, 2024.

Note 2 – Summary of Significant Accounting Policies

Basis of Accounting

The financial statements of the Plan are prepared using the accrual method of accounting. Income from investments is recorded when it is earned. Participant contributions are recorded when withheld from pay. Employer contributions are recorded in the period to which they pertain. Expenses are recorded in the accounting period in which they are incurred.

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 disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

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NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2024 AND 2023

Investment Valuation and Income Recognition

Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. The Plan's Investment Committee determines the Plan's valuation policies utilizing information provided by the Investment Custodians and investment advisor. See Note 4 for a discussion of fair value measurements.

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

Noninterest-bearing Cash

Assets of the Plan that are not invested by the Trustee and Custodians may, at times, be temporarily held in a noninterest-bearing cash account. These temporary cash accounts are not subject to federally insured limits. The Plan has not experienced any losses in such accounts. The Plan believes it is not exposed to any significant credit risk on cash.

Participant Notes Receivable

Participant notes receivable are valued 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 has been recorded as of December 31, 2024 or 2023. Delinquent participant notes receivable are reclassified as distributions based upon the terms of the plan document.

Payment of Benefits

Benefits are recorded when paid.

Fees and Expenses

Certain expenses of maintaining the Plan are paid by the Plan, unless otherwise paid by the Plan Sponsor or participating employers. Expenses that are paid by the Plan Sponsor or participating employers 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. Investment-related expenses are included in net appreciation or depreciation in fair value of investments.

Subsequent Events

The financial statements and related disclosures include evaluation of events up through and including June 12, 2026, which is the date the financial statements were available to be issued.

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NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2024 AND 2023

From January 1, 2025 through the date the financial statements were available to be issued, 9 new participating employers signed adoption agreements to participate in the Plan. Of the newly participating employers, 7 transferred prior assets to the Plan, which totaled approximately \$5,300,000. Also, from January 1, 2025, through the date the financial statements were available to be issued, 11 participating employers made the decision to transfer out of the Plan. Approximately \$7,800,000 of assets were transferred out of the Plan and \$7,100,000 were distributed to participants due to termination of participation from January 1, 2025 through the date the financial statements were available to be issued.

Note 3 – Unaudited Investment Information Certified by the Custodians

Plan management has elected the method of compliance permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. As permitted under such election, the following information has been certified by AdvisorTrust, Inc. and Charles Schwab Trust Bank as to its completeness and accuracy and was not subjected to any auditing procedures performed by the Plan's independent auditors:

1. All investment balances reflected in the accompanying statements of net assets available for benefits as of December 31, 2024 and 2023;
2. All investment activity reflected in the statement of changes in net assets available for benefits for the year ended December 31, 2024;
3. All investment-related information included in the Supplemental Schedule H, Line 4i - Schedule of Assets (Held at End of Year) as of December 31, 2024; and
4. Notes receivable from participants as of December 31, 2024 and 2023 and the related income on notes receivable from participants for the year ended December 31, 2024.

Note 4 – Fair Value Measurements

Generally accepted accounting principles (GAAP) establish 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 measurement) and the lowest priority to unobservable inputs (Level 3 measurement). The three levels of the fair value hierarchy are described below:

Level 1 – Inputs to the valuation methodology are unadjusted quoted prices in active markets that are accessible at the measurement date for identical, unrestricted assets or liabilities.

Level 2 – Inputs to the valuation methodology include quoted prices for similar assets or liabilities in active markets, quoted prices for identical assets or liabilities in inactive markets, inputs other than quoted prices that are observable for the asset or liability, or 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.

A financial instrument's 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.

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NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2024 AND 2023

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

Exchange traded funds: Valued at the closing price reported on the active market on which the individual security is traded.

Mutual funds: Valued at daily closing prices as reported by the fund. Mutual funds held by the Plan are open-ended mutual funds that are registered with the SEC. These funds are required to publish their daily net asset value (NAV) and to transact at that price. Mutual funds held by the Plan are deemed to be actively traded.

Self-directed brokerage accounts: Primarily contain investments in U.S. Government and agency obligations, mutual funds, exchange traded funds, certificates of deposit, money market funds, common stocks and real estate investment trusts. The U.S. Government and agency obligations are valued using pricing models maximizing the use of observable inputs for similar securities. The mutual funds are valued at NAV in the same manner as noted above. The exchange traded funds, money market funds, common stocks and real estate investment trusts are valued at the closing price reported on the active market on which the individual securities are traded. The certificates of deposit are valued at amortized cost, which approximates fair value.

Interest-bearing cash: The interest-bearing cash consists of Federal Deposit Insurance Corporation ("FDIC") insured interest-bearing cash accounts. These interest-bearing cash accounts are valued at amortized cost, which approximates fair value.

Common/collective trust funds and stable value fund: Valued daily at \$1 per unit price NAV as reported by various issuers for which all significant inputs are observable. The value of the investments is based on the Plan's underlying proportionate share of the underlying values reported by various issuers.

The tables below set forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2024 and 2023. Classification within the fair value hierarchy table is based on the lowest level of any input that is significant to the fair value measurement.

Assets at Fair Value as of December 31, 2024				
	Level 1	Level 2	Level 3	Total
Exchange traded funds	\$ 329,309	\$ -	\$ -	\$ 329,309
Mutual funds	140,038,233	-	-	140,038,233
Self-directed brokerage accounts	324,078	250,970	-	575,048
Interest-bearing cash	-	3,689,470	-	3,689,470
 Total assets in the fair value hierarchy	 <u>\$ 140,691,620</u>	 <u>\$ 3,940,440</u>	 <u>\$ -</u>	 144,632,060
 Investments measured at net asset value ^(a)				 <u>10,977,444</u>
 Investments, at fair value				 <u>\$ 155,609,504</u>

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NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2024 AND 2023

Assets at Fair Value as of December 31, 2023				
	Level 1	Level 2	Level 3	Total
Exchange traded funds	\$ 291,221	\$ -	\$ -	\$ 291,221
Mutual funds	62,271,127	-	-	62,271,127
Self-directed brokerage accounts	186,713	221,850	-	408,563
Interest-bearing cash	-	683,380	-	683,380
Total assets in the fair value hierarchy	\$ 62,749,061	\$ 905,230	\$ -	63,654,291
Investments measured at net asset value ^(a)				<u>9,329,316</u>
Investments, at fair value				<u>\$ 72,983,607</u>

- (a) In accordance with Subtopic 820-10, a certain investment which was measured at net asset value per share (common/collective trust funds and stable value fund) has not been classified in the fair value hierarchy. The fair value amounts presented in this table are intended to permit reconciliation of the fair value hierarchy to the line items presented in the statements of net assets available for benefits.

The following table sets forth additional disclosures for the fair value measurement of investments in certain entities that calculate net asset value (or its equivalent) as of December 31, 2024 and 2023:

	As of December 31,				
	2024	2023			
	Fair Value	Fair Value	Unfunded Commitments	Redemption Frequency	Redemption Notice Period
Common/collective trust funds	\$ 10,973,390	\$ 9,326,578	None	Daily	60 days
Stable value fund	4,054	2,738	None	Daily	60 days
	<u>\$ 10,977,444</u>	<u>\$ 9,329,316</u>			

Note 5 – Party-in-Interest Transactions

Certain plan investments are managed by AdvisorTrust, Inc., who is the Plan's Trustee and an Investment Custodian. The Plan's self-directed brokerage accounts are managed by Charles Schwab Trust Bank, who also serves as an Investment Custodian to the Plan. During the year ended December 31, 2024, the Plan paid indirect compensation to the Investment Custodians for services rendered. Indirect compensation (that is netted against investment income on the statement of changes in net assets available for benefits) is paid to the Investment Custodians from total annual operating expenses charged on the balance of fund investments, depending on the particular fund. Additionally, certain plan investments are managed by Soltis Investment Advisors, LLC, a party-in-interest who also provides investment advisory services to the Plan and receives direct compensation from the Plan. The Plan also pays direct compensation to PCS Retirement, LLC for recordkeeping and administration functions. Transactions involving these investments are considered party-in-interest transactions; however, these transactions are not considered prohibited transactions under 29 CFR 408(b) of the ERISA regulations.

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NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2024 AND 2023

Note 6 – Plan Termination

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

Note 7 – Plan Amendment and Tax Status

The Plan is utilizing a non-standardized pre-approved plan, which has been filed with the IRS and has received a favorable opinion letter dated June 30, 2020 from the IRS. The Plan Sponsor has not elected to apply for an individual IRS Determination Letter upon adoption of the Plan nor on any subsequent amendments. However, the Plan Sponsor believes that the Plan is currently designed and being operated in compliance with applicable requirements of the Internal Revenue Code and, therefore, that the Plan is qualified under Section 401(a) and that the related Trust is tax-exempt as of December 31, 2024.

IRS coverage and nondiscrimination tests have not been completed for certain participating employers as of the date these financial statements were issued. The incomplete IRS testing and incomplete filing of the Plan's Form 5500 for the year ended December 31, 2024 may or may not impact the Plan's qualified tax-exempt status.

The Plan permitted provisions of SECURE Act 2.0 during the years ended December 31, 2024 and 2023. Written amendments to the plan document to reflect these operational changes will be adopted at a later date in accordance with the deadlines pursuant to applicable laws and IRS guidance.

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 not be sustained upon examination by the IRS. As of December 31, 2024, the Plan Administrator believes that the Plan has no uncertain tax positions that qualify for either recognition or disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, the Plan is currently not being examined.

Note 8 – Risks and Uncertainties

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

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NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2024 AND 2023

Note 9 – Prohibited Transactions

As required by ERISA Section 2510.3-102, the participating employers of the PEP are required to segregate participant contributions to the Plan from its general assets as soon as practicable.

During the year ended December 31, 2024, participant contributions of \$64,132 were not remitted to the Plan timely. The participating employers have not yet made a contribution to compensate the Plan's affected participants for lost investment earnings relating to this prohibited transaction during the year ended December 31, 2024.

During the year ended December 31, 2023, participant contributions of \$2,018,237 were not remitted to the Plan timely. The participating employers have not yet made a contribution to compensate the Plan's affected participants for lost investment earnings relating to this prohibited transaction during the year ended December 31, 2023.

During the year ended December 31, 2022, participant contributions of \$443,707 were not remitted to the Plan timely. The participating employers have not yet made a contribution to compensate the Plan's affected participants for lost investment earnings relating to this prohibited transaction during the year ended December 31, 2022.

SUPPLEMENTAL INFORMATION

401(k) SIMPLIFIED FLEXIBLE

SCHEDULE OF DELINQUENT PARTICIPANT CONTRIBUTIONS YEAR ENDED DECEMBER 31, 2024 - Form 5500, Schedule H, Line 4a - EIN #46-4091337/PLAN 002

Participant Contributions Transferred Late to the Plan			Check Here if Late Participant Loan Repayments Are Included	Total That Constitutes Nonexempt Prohibited Transactions			Total Fully Corrected Under Voluntary Fiduciary Correction Program and PTE 2002-51
				Contributions Not Corrected	Contributions Corrected Outside VFCP	Contributions Pending Corrections in VFCP	
Amount Withheld	Date Withheld	Date Remitted					
\$ 443,707	2022 - Various (a)		√	\$ 443,707	\$ -	\$ -	\$ -
2,018,237	2023 - Various (a)		√	2,018,237	-	-	-
29	7/30/2024	8/7/2024		29 (b)	-	-	-
12,113	12/5/2024	12/30/2024		12,113 (b)	-	-	-
3,356	8/16/2024	8/26/2024	√	3,356 (c)	-	-	-
9,929	7/1/2024	8/1/2024	√	9,929 (d)	-	-	-
7,852	7/15/2024	8/14/2024	√	7,852 (d)	-	-	-
8,976	8/1/2024	8/14/2024	√	8,976 (d)	-	-	-
8,976	8/15/2024	8/27/2024	√	8,976 (d)	-	-	-
7,329	10/1/2024	10/11/2024	√	7,329 (d)	-	-	-
5,572	11/1/2024	11/13/2024	√	5,572 (d)	-	-	-

(a) The predecessor auditors did not delineate the 2022 and 2023 plan year delinquent participant contributions in prior year's financial statements.

(b) Delinquent participant contributions relate to participating employer Jones Paint & Glass. Participant contributions were deposited on the "Date Remitted" herein and the related lost earnings have not yet been deposited.

(c) Delinquent participant contributions relate to participating employer Community Treatment Alternatives. Participant contributions were deposited on the "Date Remitted" herein and the related lost earnings have not yet been deposited.

(d) Delinquent participant contributions relate to participating employer Avtech Capital. Participant contributions were deposited on the "Date Remitted" herein and the related lost earnings have not yet been deposited.

401(k) SIMPLIFIED FLEXIBLE

SCHEDULE OF ASSETS (HELD AT END OF YEAR)

DECEMBER 31, 2024

- Form 5500, Schedule H, Line 4i -

EIN #46-4091337/PLAN 002

(a)	(b) Identity of Issuer, Borrower, Lessor or Similar Party	(c) Description of Investment including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	(e) Current Value
Mutual funds			
	Adirondack Funds	Adirondack Small-Cap Fund	\$ 179
	American Century Investments	American Century Emerging Markets	7,241
	American Century Investments	American Century Short Duration Inflation Protected Bond Fund	4,508
	American Century Investments	American Century Inflation-Adjusted Bond Fund	400
	American Funds	American Funds Growth Fund of Amer R4	18
	American Funds	American Funds EuroPacific Growth Fund	119,184
	Artisan Partners	Artisan Mid-Cap Fund	157,949
	Artisan Partners	Artisan Mid-Cap Fund	69,394
	Baird Asset Management	Baird Core Plus Bond Fund	3,744
	BlackRock	BlackRock Total Return Bond Fund Class 6	3,551
	BlackRock	BlackRock High Yield Instl	1,619
	Boston Partners	Boston Partners Small-Cap Value Fund	25,615
	Brown Advisory	Brown Advisory Sustainable Growth Fund	558,630
	City National Rochdale Funds	City National Rochdale Equity Income Fund	322
	Cohen & Steers	Cohen & Steers Institutional Realty Shares Fund	119,325
	Cohen & Steers	Cohen & Steers Realty Shares Fund	74,616
	Cohen & Steers	Cohen & Steers Institutional Realty Shares Fund	248
	Dimensional Fund Advisors	DFA U.S. Small-Cap Fund	512,547
	Dimensional Fund Advisors	DFA U.S. Large Company Fund	525,333
	Dimensional Fund Advisors	DFA Real Estate Securities Fund	243,883
	Dimensional Fund Advisors	DFA Commodity Strategy Fund	139,113
	Dimensional Fund Advisors	DFA Emerging Markets Core Equity Fund	512
	Dimensional Fund Advisors	DFA International Small Company Fund	110,882
	Dimensional Fund Advisors	DFA World ex U.S. Government Fixed Income Fund	16,766
	Dimensional Fund Advisors	DFA Short-Term Government Fund	305
	Dodge & Cox	Dodge & Cox Income Fund	75,592
	DWS Asset Management	DWS RREEF Global Infrastructure Fund	65
	Federated	Federated Hermes Strategic Value Div A	17
	Fidelity Investments	Fidelity 500 Index Fund	29,101,472
	Fidelity Investments	Fidelity Freedom Index 2035 Fund	6,905,721
	Fidelity Investments	Fidelity Mid-Cap Index Fund	6,884,510
	Fidelity Investments	Fidelity Freedom Index 2030 Fund	3,809,425
	Fidelity Investments	Fidelity Emerging Markets Index Fund	6,068,421
	Fidelity Investments	Fidelity Freedom Index 2025 Fund	3,482,949
	Fidelity Investments	Fidelity Small-Cap Index Fund	4,997,104
	Fidelity Investments	Fidelity Freedom Index 2040 Fund	5,973,419
	Fidelity Investments	Fidelity Freedom Index 2050 Fund	5,834,073
	Fidelity Investments	Fidelity Freedom Index 2045 Fund	4,930,558
	Fidelity Investments	Fidelity Real Estate Index Fund	2,944,667
	Fidelity Investments	Fidelity Small-Cap Value Index Fund	1,368,114
	Fidelity Investments	Fidelity Freedom Index 2055 Fund	2,926,338
	Fidelity Investments	Fidelity Small-Cap Growth Index Fund	1,498,679
	Fidelity Investments	Fidelity Freedom Index 2020 Fund	3,559,464
	Fidelity Investments	Fidelity Freedom Index 2060 Fund	2,308,643
	Fidelity Investments	Fidelity Emerging Markets Fund	198,823
	Fidelity Investments	Fidelity International Bond Index	87,156
	Fidelity Investments	Fidelity Large Cap Growth Idx	41,814
	Fidelity Investments	Fidelity Large Cap Value Index	13,401
	Fidelity Investments	Fidelity Select Health Care	8,876
	Fidelity Investments	Fidelity Freedom Index 2065 Fund	305,950
	Fidelity Investments	Fidelity Inflation-Protected Bond Index Fund	121,604
	Fidelity Investments	Fidelity U.S. Bond Index Fund	100,555
	Fidelity Investments	Fidelity Global ex U.S. Index Fund	145,464
	Fidelity Investments	Fidelity Real Estate Income	629
	Grandeur Peak Global	Grandeur Peak International Opportunities Fund	326
	Harbor Capital	Harbor International Fund	155
	Hartford Funds	Hartford Mid-Cap Fund	161
	Invesco	Invesco Gold & Special Minerals Fund	38,891
	J.P. Morgan Asset Management	JPMorgan Mid-Cap Value Fund	159,208
Total this page			96,588,128

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401(k) SIMPLIFIED FLEXIBLE

SCHEDULE OF ASSETS (HELD AT END OF YEAR)

DECEMBER 31, 2024

- Form 5500, Schedule H, Line 4i -

EIN #46-4091337/PLAN 002

(a)	(b) Identity of Issuer, Borrower, Lessor or Similar Party	(c) Description of Investment including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	(e) Current Value
		Total from previous page	\$ 96,588,128
	J.P. Morgan Asset Management	JPMorgan Strategic Income Opportunities Fund	38,745
	J.P. Morgan Asset Management	JPMorgan Strategic Income Opportunities Fund	17,070
	J.P. Morgan Asset Management	JP Morgan Mid Cap Value A	17
	Janus Henderson	Janus Henderson Triton Fund	185,101
	Janus Henderson	Janus Henderson Mid Cap Value	17
	John Hancock	John Hancock Funds Disciplined Value Fund	17
	Lord Abbett	Lord Abbett Floating Rate Fund	2,062,094
	MFS Investment Management	MFS Mid-Cap Value Fund	49,696
	MFS Investment Management	MFS Intl Diversification	361
	Nuveen	Nuveen International Equity Index Fund	12,195,590
	Nuveen	Nuveen Large-Cap Growth Index Fund	4,826,208
	Oakmark Funds	Oakmark Fund	390,177
	Oakmark Funds	Oakmark International Fund	32,977
	T. Rowe Price	T. Rowe Price Global Technology Fund	412,699
	T. Rowe Price	T. Rowe Price Blue Chip Growth Fund	18,753
	TCW	TCW MetWest Total Return Bond Fund	44,156
	TCW	TCW MetWest Total Return Bond Fund	13,833
	Vanguard	Vanguard Value Index Fund	2,794,472
	Vanguard	Vanguard Information Technology Index Fund	4,415,354
	Vanguard	Vanguard Short-Term Corporate Bond Index Fund	3,267,821
	Vanguard	Vanguard Intermediate-Term Investment-Grade Fu	2,681,014
	Vanguard	Vanguard Health Care Index Fund	1,734,706
	Vanguard	Vanguard Mid-Cap Growth Index Fund	1,267,119
	Vanguard	Vanguard Emerging Markets Bond Fund	1,461,484
	Vanguard	Vanguard High-Yield Corporate Fund	1,305,686
	Vanguard	Vanguard Energy Index Fund	558,773
	Vanguard	Vanguard Developed Markets Index Fund	372,108
	Vanguard	Vanguard Mid-Cap Value Index Fund	346,130
	Vanguard	Vanguard Long-Term Investment-Grade Fund	711,159
	Vanguard	Vanguard Financials Index Fund	361,290
	Vanguard	Vanguard Emerging Markets Stock Index Fund	247,241
	Vanguard	Vanguard Total International Bond Index Fund	174,710
	Vanguard	Vanguard Mid-Cap Index Fund	154,261
	Vanguard	Vanguard Shrt-Term Infl-Prot Sec Idx Adm	40,920
	Vanguard	Vanguard Commodity Strategy Admiral	27,357
	Vanguard	Vanguard Target Retirement 2050 Fund	199,140
	Vanguard	Vanguard Target Retirement 2035 Fund	78,677
	Vanguard	Vanguard Target Retirement 2040 Fund	68,142
	Vanguard	Vanguard Target Retirement 2045 Fund	99,556
	Vanguard	Vanguard FTSE All-World ex-U.S. Small-Cap Index Fund	211,195
	Vanguard	Vanguard Target Retirement 2020 Fund	29,074
	Vanguard	Vanguard Target Retirement 2055 Fund	70,831
	Vanguard	Vanguard Target Retirement 2030 Fund	59,060
	Vanguard	Vanguard Target Retirement 2060 Fund	69,053
	Vanguard	Vanguard Target Retirement 2065 Fund	111,797
	Vanguard	Vanguard Target Retirement 2025 Fund	59,163
	Vanguard	Vanguard Total Stock Market Index Fund	13,350
	Vanguard	Vanguard Intermediate-Term Treasury Fund	32,616
	Vanguard	Vanguard Short-Term Investment-Grade Fund	5,571
	Vanguard	Vanguard Target Retirement Income Fund	25
	Wasatch Global Investors	Wasatch Small-Cap Value Fund	113,402
	Wasatch Global Investors	Wasatch Global Opportunities Fund	16,401
	Wasatch Global Investors	Wasatch Emerging Markets Small-Cap Fund	222
	Westwood	Westwood Salient MLP & Energy Infrastructure Fund	3,675
	William Blair	William Blair Small-Mid Cap	22
	William Blair	William Blair International Growth	17
		Total mutual funds	140,038,233

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401(k) SIMPLIFIED FLEXIBLE

SCHEDULE OF ASSETS (HELD AT END OF YEAR)

DECEMBER 31, 2024

- Form 5500, Schedule H, Line 4i -

EIN #46-4091337/PLAN 002

(a)	(b) Identity of Issuer, Borrower, Lessor or Similar Party	(c) Description of Investment including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	(e) Current Value
Common/collective trust funds			
	Alta Trust Company	Intellicents Moderately Aggressive CIF	\$ 283,069
	Alta Trust Company	Intellicents Moderate CIF	113,912
	Alta Trust Company	Intellicents Moderately Conservative CIF	108,342
	Alta Trust Company	Intellicents Aggressive CIF	72,121
	Alta Trust Company	Intellicents Conservative CIF	32,521
	Alta Trust Company	Intellicents Preservation CIF	3,883
*	Soltis Collective Investment Trust	SIA Target Date 2030 by T. Rowe Price	1,749,161
*	Soltis Collective Investment Trust	SIA Target Date 2035 by T. Rowe Price	1,852,654
*	Soltis Collective Investment Trust	SIA Target Date 2040 by T. Rowe Price	1,506,460
*	Soltis Collective Investment Trust	SIA Target Date 2045 by T. Rowe Price	1,228,542
*	Soltis Collective Investment Trust	SIA Target Date 2050 by T. Rowe Price	889,535
*	Soltis Collective Investment Trust	SIA Target Date 2060 by T. Rowe Price	376,680
*	Soltis Collective Investment Trust	SIA Target Date 2055 by T. Rowe Price	454,324
*	Soltis Collective Investment Trust	SIA Target Date 2025 by T. Rowe Price	745,769
*	Soltis Collective Investment Trust	SIA Balanced Moderate Fund	369,039
*	Soltis Collective Investment Trust	SIA Balanced Conservative Fund	190,724
*	Soltis Collective Investment Trust	SIA Target Date 2020 by T. Rowe Price	176,695
*	Soltis Collective Investment Trust	SIA Balanced Growth Fund	80,101
*	Soltis Collective Investment Trust	SIA Large Cap Growth by T. Rowe Price	87,670
*	Soltis Collective Investment Trust	SIA Income Growth Fund	6,330
*	Soltis Collective Investment Trust	SIA Diversified Bond Fund Class 1	114,471
*	Soltis Collective Investment Trust	SIA Global Growth Fund Class 1	531,387
Total common/collective trust funds			10,973,390
Exchange traded funds			
	Vanguard	Vanguard FTSE All-World ex-US Small Cap ETF	313,038
	Vanguard	Vanguard Total International Bond ETF	16,271
Total exchange traded funds			329,309
Stable value fund			
	Principal Global Investors Trust Company	Morley Stable Value Fund	4,054
Self-directed brokerage accounts			
*	Charles Schwab Trust Bank	Schwab Personal Choice Retirement Accounts	575,048
Interest-bearing cash			
*	Charles Schwab Trust Bank	Schwab Bank Savings	3,689,470
*	Notes Receivable from Participants	Loans to participants, interest rates ranging from 4.25% to 10.50% with various maturities	1,702,048
Total assets (held at end of year)			<u>\$ 157,311,552</u>

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* Denotes a party-in-interest as defined by ERISA.

401(k) SIMPLIFIED FLEXIBLE

SCHEDULE OF ASSETS (HELD AT END OF YEAR)

DECEMBER 31, 2024

- Form 5500, Schedule H, Line 4i -

EIN #46-4091337/PLAN 002

(a)	(b) Identity of Issuer, Borrower, Lessor or Similar Party	(c) Description of Investment including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	(e) Current Value
Mutual funds			
	Adirondack Funds	Adirondack Small-Cap Fund	\$ 179
	American Century Investments	American Century Emerging Markets	7,241
	American Century Investments	American Century Short Duration Inflation Protected Bond Fund	4,508
	American Century Investments	American Century Inflation-Adjusted Bond Fund	400
	American Funds	American Funds Growth Fund of Amer R4	18
	American Funds	American Funds EuroPacific Growth Fund	119,184
	Artisan Partners	Artisan Mid-Cap Fund	157,949
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	Baird Asset Management	Baird Core Plus Bond Fund	3,744
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	Cohen & Steers	Cohen & Steers Institutional Realty Shares Fund	119,325
	Cohen & Steers	Cohen & Steers Realty Shares Fund	74,616
	Cohen & Steers	Cohen & Steers Institutional Realty Shares Fund	248
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	Dimensional Fund Advisors	DFA U.S. Large Company Fund	525,333
	Dimensional Fund Advisors	DFA Real Estate Securities Fund	243,883
	Dimensional Fund Advisors	DFA Commodity Strategy Fund	139,113
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	Dimensional Fund Advisors	DFA International Small Company Fund	110,882
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	Dodge & Cox	Dodge & Cox Income Fund	75,592
	DWS Asset Management	DWS RREEF Global Infrastructure Fund	65
	Federated	Federated Hermes Strategic Value Div A	17
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	Fidelity Investments	Fidelity Freedom Index 2035 Fund	6,905,721
	Fidelity Investments	Fidelity Mid-Cap Index Fund	6,884,510
	Fidelity Investments	Fidelity Freedom Index 2030 Fund	3,809,425
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	Fidelity Investments	Fidelity Freedom Index 2025 Fund	3,482,949
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	Fidelity Investments	Fidelity Freedom Index 2040 Fund	5,973,419
	Fidelity Investments	Fidelity Freedom Index 2050 Fund	5,834,073
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	Fidelity Investments	Fidelity Real Estate Index Fund	2,944,667
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	Fidelity Investments	Fidelity Freedom Index 2055 Fund	2,926,338
	Fidelity Investments	Fidelity Small-Cap Growth Index Fund	1,498,679
	Fidelity Investments	Fidelity Freedom Index 2020 Fund	3,559,464
	Fidelity Investments	Fidelity Freedom Index 2060 Fund	2,308,643
	Fidelity Investments	Fidelity Emerging Markets Fund	198,823
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	Fidelity Investments	Fidelity Freedom Index 2065 Fund	305,950
	Fidelity Investments	Fidelity Inflation-Protected Bond Index Fund	121,604
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	Fidelity Investments	Fidelity Global ex U.S. Index Fund	145,464
	Fidelity Investments	Fidelity Real Estate Income	629
	Grandeur Peak Global	Grandeur Peak International Opportunities Fund	326
	Harbor Capital	Harbor International Fund	155
	Hartford Funds	Hartford Mid-Cap Fund	161
	Invesco	Invesco Gold & Special Minerals Fund	38,891
	J.P. Morgan Asset Management	JPMorgan Mid-Cap Value Fund	159,208
Total this page			96,588,128

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401(k) SIMPLIFIED FLEXIBLE

SCHEDULE OF ASSETS (HELD AT END OF YEAR)

DECEMBER 31, 2024

- Form 5500, Schedule H, Line 4i -

EIN #46-4091337/PLAN 002

(a)	(b) Identity of Issuer, Borrower, Lessor or Similar Party	(c) Description of Investment including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	(e) Current Value
		Total from previous page	\$ 96,588,128
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	J.P. Morgan Asset Management	JPMorgan Strategic Income Opportunities Fund	17,070
	J.P. Morgan Asset Management	JP Morgan Mid Cap Value A	17
	Janus Henderson	Janus Henderson Triton Fund	185,101
	Janus Henderson	Janus Henderson Mid Cap Value	17
	John Hancock	John Hancock Funds Disciplined Value Fund	17
	Lord Abbett	Lord Abbett Floating Rate Fund	2,062,094
	MFS Investment Management	MFS Mid-Cap Value Fund	49,696
	MFS Investment Management	MFS Intl Diversification	361
	Nuveen	Nuveen International Equity Index Fund	12,195,590
	Nuveen	Nuveen Large-Cap Growth Index Fund	4,826,208
	Oakmark Funds	Oakmark Fund	390,177
	Oakmark Funds	Oakmark International Fund	32,977
	T. Rowe Price	T. Rowe Price Global Technology Fund	412,699
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	TCW	TCW MetWest Total Return Bond Fund	44,156
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	Vanguard	Vanguard Value Index Fund	2,794,472
	Vanguard	Vanguard Information Technology Index Fund	4,415,354
	Vanguard	Vanguard Short-Term Corporate Bond Index Fund	3,267,821
	Vanguard	Vanguard Intermediate-Term Investment-Grade Fu	2,681,014
	Vanguard	Vanguard Health Care Index Fund	1,734,706
	Vanguard	Vanguard Mid-Cap Growth Index Fund	1,267,119
	Vanguard	Vanguard Emerging Markets Bond Fund	1,461,484
	Vanguard	Vanguard High-Yield Corporate Fund	1,305,686
	Vanguard	Vanguard Energy Index Fund	558,773
	Vanguard	Vanguard Developed Markets Index Fund	372,108
	Vanguard	Vanguard Mid-Cap Value Index Fund	346,130
	Vanguard	Vanguard Long-Term Investment-Grade Fund	711,159
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	Vanguard	Vanguard Target Retirement 2035 Fund	78,677
	Vanguard	Vanguard Target Retirement 2040 Fund	68,142
	Vanguard	Vanguard Target Retirement 2045 Fund	99,556
	Vanguard	Vanguard FTSE All-World ex-U.S. Small-Cap Index Fund	211,195
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	Vanguard	Vanguard Target Retirement 2030 Fund	59,060
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	William Blair	William Blair International Growth	17
		Total mutual funds	140,038,233

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DECEMBER 31, 2024

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	Alta Trust Company	Intellicents Aggressive CIF	72,121
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*	Soltis Collective Investment Trust	SIA Target Date 2030 by T. Rowe Price	1,749,161
*	Soltis Collective Investment Trust	SIA Target Date 2035 by T. Rowe Price	1,852,654
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*	Soltis Collective Investment Trust	SIA Target Date 2045 by T. Rowe Price	1,228,542
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*	Soltis Collective Investment Trust	SIA Large Cap Growth by T. Rowe Price	87,670
*	Soltis Collective Investment Trust	SIA Income Growth Fund	6,330
*	Soltis Collective Investment Trust	SIA Diversified Bond Fund Class 1	114,471
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	Vanguard	Vanguard Total International Bond ETF	16,271
Total exchange traded funds			329,309
Stable value fund			
	Principal Global Investors Trust Company	Morley Stable Value Fund	4,054
Self-directed brokerage accounts			
*	Charles Schwab Trust Bank	Schwab Personal Choice Retirement Accounts	575,048
Interest-bearing cash			
*	Charles Schwab Trust Bank	Schwab Bank Savings	3,689,470
*	Notes Receivable from Participants	Loans to participants, interest rates ranging from 4.25% to 10.50% with various maturities	1,702,048
Total assets (held at end of year)			\$ 157,311,552

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