

Form 5500 Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Annual Return/Report of Employee Benefit Plan This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code). ▶ Complete all entries in accordance with the instructions to the Form 5500.	OMB Nos. 1210-0110 1210-0089 2025 This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2025 or fiscal plan year beginning 04/01/2025 and ending 12/31/2025	
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) _____
B	This return/report is: ☒ the first return/report ☐ the final return/report ☐ an amended return/report ☒ a short plan year return/report (less than 12 months)
C	If the plan is a collectively-bargained plan, check here. ▶ ☐
D	Check box if filing under: ☒ 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 DEEL PEO RETIREMENT PLAN
1b	Three-digit plan number (PN) ▶ 001
1c	Effective date of plan 04/01/2025
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) DEEL PEO, LLC PO BOX 32 MT. LAUREL, NJ 08054
2b	Employer Identification Number (EIN) 92-2581574
2c	Plan Sponsor's telephone number 415-915-9803
2d	Business code (see instructions) 541600

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.	07/31/2026	DANIELLE WHITE
	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	5 162
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) 162 6a(2) 3215 6b 0 6c 1319 6d 4534 6e 0 6f 4534 6g(1) 0 6g(2) 4007 6h 0
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7

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

2E 2F 2G 2J 2K 2S 2V 3D

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

9a Plan funding arrangement (check all that apply) (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 _____
- (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 2025 Form M-1 annual report. If the plan was not required to file the 2025 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code _____

SCHEDULE 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
		2025
		This Form is Open to Public Inspection.
For calendar plan year 2025 or fiscal plan year beginning 04/01/2025 and ending 12/31/2025		
A Name of plan DEEL PEO RETIREMENT PLAN	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 DEEL PEO, LLC	D Employer Identification Number (EIN) 92-2581574	

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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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)

SLAVIC INTEGRATED ADMINISTRATION

65-0608221

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
15 37 38 50	THIRD PARTY ADMINISTRATOR	278357	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

SLAVIC MUTUAL FUND MANAGEMENT CORP

59-2749576

(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?
28 51	INVESTMENT MANAGEMENT	57413	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
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(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE H (Form 5500) Department of the Treasury Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 2025 This Form is Open to Public Inspection
For calendar plan year 2025 or fiscal plan year beginning 04/01/2025 and ending 12/31/2025		
A Name of plan DEEL PEO RETIREMENT PLAN		B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 DEEL PEO, LLC		D Employer Identification Number (EIN) 92-2581574

Part I	Asset and Liability Statement		
1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.			
Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a	0	
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)		451427
(2) Participant contributions.....	1b(2)		952419
(3) Other	1b(3)		6109
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		
(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)		733747
(9) Value of interest in common/collective trusts	1c(9)		
(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)		98984484
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(15) Other.....	1c(15)		

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
1e Buildings and other property used in plan operation	1e		
1f Total assets (add all amounts in lines 1a through 1e)	1f	0	101128186

Liabilities

1g Benefit claims payable	1g		
1h Operating payables	1h		
1i Acquisition indebtedness	1i		
1j Other liabilities	1j		48538
1k Total liabilities (add all amounts in lines 1g through 1j)	1k	0	48538

Net Assets

1l Net assets (subtract line 1k from line 1f)	1l	0	101079648
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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)	6362153	
(B) Participants	2a(1)(B)	14788649	
(C) Others (including rollovers)	2a(1)(C)	3634459	
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		24785261
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)	24860	
(F) Other	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		24860
(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)	2164415	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		2164415
(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)		0
(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)		0

		(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)		5076151
c Other income	2c		
d Total income. Add all income amounts in column (b) and enter total	2d		32050687

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	6011277	
(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)		6011277
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses:			
(1) Salaries and allowances	2i(1)		
(2) Contract administrator fees	2i(2)	278357	
(3) Recordkeeping fees	2i(3)		
(4) IQPA audit fees	2i(4)		
(5) Investment advisory and investment management fees	2i(5)	57413	
(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)		335770
j Total expenses. Add all expense amounts in column (b) and enter total	2j		6347047

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		25703640
l Transfers of assets:			
(1) To this plan	2l(1)		76839733
(2) From this plan	2l(2)		1463725

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: **METZ CPA, PLLC**

(2) EIN: **46-4558541**

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.)	☒	☐	49587
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?	☒	☐	500000
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)
INTEGRITY EMPLOYEE LEASING RETIREMENT PLAN	59-3611544	001
SLAVIC SECURE PEP	65-0608221	001
FUSION SPECIALITY AMERICAS INSURANCE SERVICES LLC 401(K) PLAN	85-0829272	001
VENSURE RETIREMENT PLAN	39-2377547	016

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 _____.

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)
JUSTWORKS RETIREMENT SAVINGS PLAN SUPERMOVE, INC.	46-2283648	333

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

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

SCHEDULE R (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Retirement Plan Information This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 2025 This Form is Open to Public Inspection.
For calendar plan year 2025 or fiscal plan year beginning 04/01/2025 and ending 12/31/2025		
A Name of plan DEEL PEO RETIREMENT PLAN		B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 DEEL PEO, LLC		D Employer Identification Number (EIN) 92-2581574
Part I	Distributions	
All references to distributions relate only to payments of benefits during the plan year.		
1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....		1
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): 65-0708495		
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) 2025 v. 250312		

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 Q702352A.

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 2025 This Form is Open to Public Inspection
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For calendar plan year 2025 or fiscal plan year beginning 04/01/2025 and ending 12/31/2025		
A Name of plan DEEL PEO RETIREMENT PLAN	B Three-digit Plan number (PN)..... ▶	001
C Plan administrator's name as shown on line 3a of Form 5500/Form 5500-SF DEEL PEO, LLC	D Administrator's EIN 92-2581574	

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 CINCHY USA INC	2b EIN 61-2166938	2c Percentage of Total Contributions for the Plan Year 0.13	2d Aggregate Account Balances Attributable to Participating Employer 62235
2a Name of Participating Employer MIRRORWEB INC	2b EIN 32-0578428	2c Percentage of Total Contributions for the Plan Year 0.86	2d Aggregate Account Balances Attributable to Participating Employer 169453

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	

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

**Schedule MEP (2025)
v. 250312**

Part II Participating Employer Information (Continued).

Use this page for additional 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	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
LEGENDS OF VENARI	87-3497719	0.01	20223
PURPLE APPLE LLC	99-3558729	0.51	552579
TVG CONSULTING LLC	99-4374891	0.38	69290
AVIDITY EVENTS LLC	99-4437042	0.32	220041
HEADPHONES INC	82-0658925	0.11	31886
SELECT PROPERTIES INC DBA SELECT ROW	85-0388553	1.54	1719623
EQUDIGITAL INC DBA JUMPR	93-2235506	0.06	39964
TOUTON USA	75-3269092	0.19	271640
CAPITAL LINK GREEN HOLDING INC	99-3179666	0.06	21114

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Part II Participating Employer Information (Continued).

Use this page for additional 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	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
JEWISH BOOK COUNCIL	13-3737760	0.07	24361
FIME NORTH AMERICA LLC	99-1286936	3.31	1350396
DEALCATALYST INC	87-3613241	0.16	51006
HOSTAWAY US LLC	99-4869267	1.63	892102
WALR USA INC	86-3866856	0.43	152000
ATLAS VMS INC	92-0944878	0.34	203043
STOIC TECHNOLOGY CORPORATION DBA FORMDR	83-1405532	0.32	329049
SEM USA CORP	30-1397815	0.08	21130
FREE2MOVE NORTH AMERICA INC	82-4806319	0.56	912353

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Part II Participating Employer Information (Continued).

Use this page for additional 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	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
VAIRE COMPUTING INC	99-1291609	0.27	125926
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
AMIUS AMERICAS CORP	38-4042827	0.86	808048
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CHEQROOM USA LLC	92-1661369	0.60	276091
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PAT MCGRATH COSMETICS LLC DBA PAT MCGRATH LABS	47-3833615	0.84	2662858
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
YOTTA AUTOMATED SOFTWARE SOLUTIONS INC	87-1631475	0.44	113030
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
BUILT ENVIRONMENT OPTIMISATION LLC	30-1364668	0.04	44711
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
HAMINA WIRELESS INC	93-1672560	0.20	51376
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
WAYTRADE US LLC	99-1584316	0.20	32991
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SPRYKER SYSTEMS AMERICA INC	37-1993181	0.86	1034035

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Part II Participating Employer Information (Continued).

Use this page for additional 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	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
THE CARPENTRIES INC	92-1581581	0.18	50109
MAXHUB US INC	36-5007713	0.22	96699
PAGE TECHNOLOGY INC	99-3891094	0.15	70575
QWILR INC	36-4962615	0.35	777677
GOMBOC AI INC	88-2277252	0.78	255876
UNIONBRANDS LLC	92-4015464	0.02	4605
ALTITUDE CONTROL TECHNOLOGY LLC	86-3969559	0.06	88009
ELEVEN LABS INC	88-2721123	3.80	1686218
CARRICK US SERVICES COMPANY LLC	84-3881310	0.27	1279754

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Part II Participating Employer Information (Continued).

Use this page for additional 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	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
FORM FACTORY	82-5178433	0.09	38449
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
WILDBOOM CORPORATION	81-1119069	0.42	651980
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SYNEX INC	85-1393374	0.44	108909
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
JACQUEMUS LAMERIQUE LLC	37-2121229	0.23	68095
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
FOURCORTERS INC	99-3277271	0.03	6826
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
LIGHTNING STEP TECHNOLOGIES LLC	81-1718416	0.86	752379
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MISTRAL AI INC	99-0657949	5.91	2450478
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CHECKBOX SOFTWARE INC	93-4623997	0.21	54006
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
VYDE INC	99-1235493	0.02	7136

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Part II Participating Employer Information (Continued).

Use this page for additional 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	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
GENBIOAI INC	99-2788760	0.73	220410
HOBBS EAST LLC	46-4460678	0.13	112142
MEERO CORP	35-2834683	0.22	76553
CHANNELENGINE INC	86-2777351	0.48	342670
ELMERS MANUFACTURING INC	38-4167260	0.09	18638
KINTSUGIAI INC	88-4344201	1.50	354023
LAETRO INC	85-2270431	0.04	49628
KUBERNETES INNOVATION LABS LLC	86-2933032	0.21	259655
THE WALL STREET EXPERIENCE LLC	90-0491695	0.09	34804

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Part II Participating Employer Information (Continued).

Use this page for additional 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	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
240 TECH LLC	82-1007877	0.01	16964
AUTIFY INC	81-3777944	0.07	68304
STRONG COMPUTE SERVICES CORPORATION	99-1629329	0.02	8497
AOMNI INC	85-3834260	0.17	73216
SILENT PUSH INC	35-2689252	0.58	206877
RUNNA	37-2144360	0.12	77094
LIMBIC INC	38-4311296	0.18	85545
TROOP TRAVEL INC	87-3169821	0.51	564515
MEDIS MEDICAL IMAGING SYSTEMS INC	43-1997910	0.52	761943

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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
DUENDE SOFTWARE LLC	85-2486343	0.36	95389
SUMMA ADVISERS LLC	98-1811273	0.41	145635
SCOUTBEE INC	83-3152008	0.00	0
EYEPOPAI INC	92-1905090	0.19	87355
MIDSUMMER STUDIOS INC	93-1724996	0.56	361044
TYPEFORM US LLC	82-2393796	2.36	2702923
MALTEGO US INC	30-1408625	0.22	62198
CHAIZ INC	38-4232558	0.04	18992
NCOMPASS TECHNOLOGIES INC	36-5091911	0.02	9051

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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
GITPOD INC	85-2446507	0.57	235759
PHINYXAI	99-0554584	0.01	23657
DALET DIGITAL MEDIA SYSTEMS USA INC	13-3771154	1.59	4493706
TRICON INFOTECH LLC	81-0958112	0.11	34880
ECO STOR INC	92-3882903	0.07	20779
NIX USA INC	32-0487125	0.47	213175
STRUCTURED SOCIAL LLC	81-5272895	0.19	91854
GETTHERE LLC	30-1010950	1.53	588411
SYRE INC	47-4589510	0.85	596340

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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
SAFE ARTIFICIAL INTELLIGENCE FORUM INSTITUTE	93-4950919	0.15	47147
RHINOAI	36-4961887	1.24	554674
GENSYN INC	61-2081820	0.98	448100
SCOREPLAY INC	92-0919228	0.20	121413
MODERN FANATIC LLC	85-2499433	0.05	15614
EXTRAYEAR AI	99-2733557	0.47	174827
BRACELET USA LLC	61-2213402	0.29	333950
MALBEC LABS LLC	99-4818335	0.40	132024
4G44 ESPORTS INC	83-2619226	0.07	86173

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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
CAKEWALK ENTERTAINMENT LLC	82-2146389	0.24	196804
METHODICAL SERVICES LLC	86-3778860	0.37	233758
RECAST LABS INC	87-3698050	1.62	1281482
AEROCLOUD SYSTEMS INC	35-2616665	0.27	168178
SUPPLY WISDOM INC	84-4016410	0.71	1087419
ARCHTIS US INC	83-2038058	0.19	255718
BELLROY OPERATIONS AMERICAS INC	30-1256945	0.34	291116
BEREAL INC	87-2503004	0.28	97005
CACHENETWORKS LLC	37-1488462	0.82	931825

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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
DREADNODE INC	93-3906695	0.85	319584
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ENVISICS INC	85-2845745	0.50	1104745
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
FITXR USA INC	85-4177437	0.16	126401
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
FLUID STACK INC	36-5007834	1.45	415983
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
FUSION SPECIALTY AMERICAS INSURANCE SERVICES LLC	85-0829272	0.08	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
HAMSTER GARAGE LLC	83-4476003	0.13	141787
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
HOOK POINT LLC	85-4158285	0.00	755
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ID5 TECHNOLOGY INC	86-3236779	0.92	1272796
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
INNOVAMAT EDUCATION INC	88-1600717	0.52	172537

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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
LAUNDYSUCKSIO INC	83-1547288	0.37	367568
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MIGHTY CULTURES LLC	92-2349911	0.07	53047
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
NEAR ONE US CORP	99-1530567	0.27	106742
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
NETSOFT HOLDINGS LLC DBA HUBSTAFF	46-1176221	0.80	1336331
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ONELEET INC	36-5032549	0.19	102401
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
OTTO DMS INC	99-0679076	0.39	673813
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PRIME MOVER LLC	99-4717728	1.37	523676
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
RATIONAL ANIMATIONS INC	99-1838037	0.08	40692
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
REMO HEALTH INC PARTICIPATING EMPLOYERS	84-2729300	2.64	1670499

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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
RISK LABS USA INC	83-1325649	0.56	761490
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SEQERA INC	36-5106046	1.71	830340
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SOURCEAG LLC	99-4797571	0.07	23543
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SUPERMOVE INC	61-1937019	0.48	83
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SWINGVISION INC	47-4406128	0.78	688057
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
TANTALUM LABS LLC	99-0972929	0.17	41109
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
THIRTEEN23 CORP	22-3944732	0.26	1415652
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
LYNC HOLDCO INC	93-2074880	0.00	55817
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SUPERFILIATE INC	86-2104557	0.19	64346

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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
1MONEY TECHNOLOGIES INC	99-3891782	0.24	202868
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
GETRESPONSE INC	81-5277653	0.03	7438
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
HALO MEDIA LLC	20-5187538	1.08	2221641
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
REDSNACK TECHNOLOGIES INC	93-1623549	0.06	19485
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ALGOVERDE	87-2848609	0.05	10416
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MOOVE CARS MOBILITY USA CORP	38-4321314	1.13	344120
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MYFUNDED FUTURES LLC	93-3765771	0.33	265531
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
GLOBAL RESILIENT CITIES NETWORK	85-0990988	0.23	482798
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CRADLE TO CRADLE PRODUCTS INNOVATION INSTITUTE INC	27-1832830	0.40	932560

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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
PORT53 TECHNOLOGIES INC	82-2440994	1.30	1645863
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PYPESTREAM INC	32-0465480	1.00	2518722
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
DTERRA SOLUTIONS LLC	45-4798693	0.45	4078023
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MAG45 INC	35-2568242	0.16	167195
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
QUESTAR AUTO TECHNOLOGIES INC	36-4879192	0.07	74192
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
REEF EMPLOYER LLC	85-3300744	0.17	34493
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SYSTEM PAY SERVICES US INC DBA BVNK	93-2808285	1.09	220566
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
RESONANT LINK MEDICAL INC	33-2013025	0.34	132685
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
LEGORA INC	37-2115556	0.56	107604

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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
EPIKAST INC	88-3245110	0.15	29849
EVERWAVE INC	99-3501041	0.25	51870
MATHPIX INC	81-1623042	0.68	140716
ZAELOT INC	85-3940780	0.03	5163
CHRYOS AMERICA LLC	93-3196683	0.22	44081
ANALOG AI INC	99-5080533	0.20	38858
UPSTART CYBER LLC	85-3727052	0.20	41101
POLLY KING CO	37-1739892	0.00	155760
VENCHI US INC	38-3990077	0.79	968729

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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
KITA INSURANCE SOLUTIONS LIMITED	93-4325210	0.05	81556
SPLINE INC	36-4963683	0.28	58410
MOMENTUM CONTROLS SOFTWARE AND SERVICES USA INC	92-3031426	0.02	3201
DIRECTIONAL CAPITAL SERVICES LLC	33-3142234	0.14	29230
AVENOR RESEARCH LLC	33-1884103	0.00	461
HILTON GLOBAL ASSOCIATES INC	84-4536164	1.01	877471
KUBRICK CONSULTING INC	86-2613908	2.27	2448591
ENGAGINGIO	33-4764387	0.04	61429
TDCNA INC DBA TIMEXTENDER	46-1427004	0.67	1393486

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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
LEIA INC	32-0424200	1.29	6551394
2a Name of Participating Employer CALEB AND BROWN LIMITED	37-2116315	0.24	48426
2a Name of Participating Employer SHIFT ENTERPRISES LLC DBA VIVO TECHNOLOGIES	84-2853492	0.19	36495
2a Name of Participating Employer SILKTIDE INC	83-3562089	0.35	172493
2a Name of Participating Employer DASH0 INC	92-2680703	0.09	122390
2a Name of Participating Employer RESTOKE INC	30-1423247	0.14	28422
2a Name of Participating Employer CKAF ASSOCIATES	47-4950901	0.09	88201
2a Name of Participating Employer DOURO LABS LLC	93-2546386	0.81	216252
2a Name of Participating Employer AUTERION INC	83-3920523	1.56	2078507

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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
APARAVI SOFTWARE CORP	81-4064951	0.30	513867
STRATOSPHERE STUDIO LLC	33-4746056	0.04	8013
FIREFLY NEUROSCIENCE INC	54-1167364	0.25	46598
SILVER LAKE DIGITAL INC	82-3833659	0.03	0
DEFI DEVELOPMENT CORP	83-2676794	0.31	61630
SENSEMITTER CORPORATION	33-4606638	0.01	2547
CLARITY AI INC	81-5230730	0.26	556516
HEYCO ENERGY GROUP INC	75-3008779	0.62	3979148
GLOBAL JOURNAL MEDIA CORP	93-3980469	0.04	7459

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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
BROKER GENIUS INC DBA AUTOMATIQ	81-2100564	3.06	6386040
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SCALA TEAMS LLC	33-3851933	0.09	164280
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
TAURUS BIDCO LLC	33-4176870	0.26	89278
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
RTCAMP INC	38-4040491	0.01	2626
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SORACOM GLOBAL INC	81-3659159	0.96	2667975
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
GOOD ALMA GROUP LLC	82-5001323	0.27	52897
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
LABRA VENTURES INC	86-2184632	0.12	22939
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SH STUDIO INC	88-1232856	0.04	8667
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
HADRIAN SECURITY INC	33-3556652	0.17	33669

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FOLIO SERVICES INC	93-1386207	0.29	58123
NOOIE LLC	83-4142631	0.13	24974
TEMA ETFs LLC	93-3388004	0.17	47024
CORDIER USA LLC	27-1732345	0.16	239840
KASTHALL NORTH AMERICA INC	82-4612283	0.02	3293
MULTIVERSE COMPUTING LLC	38-4340622	0.05	10502
MARTIAL ARTS ON RAILS LLC DBA GYMDESK	84-2840083	0.14	258615
LIVEHIRE US INC	84-2591555	0.02	278208
REACTIVE MARKETS LLC	38-4307487	0.08	17480

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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
LETTERBOXD US INC	39-2793979	0.17	38959
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
NETWORK TEST LABS LLC DBA CYBERCLAN	61-1951792	0.06	11018
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
GUARDARE INC	93-4954486	0.12	23048
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ELYSIAN STRATEGIC MARKETING INC DBA ROBIN	85-3108132	0.08	201512
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
JIT INC	85-1604910	0.07	106908
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ATHENA US CORP	33-3908800	1.35	688918
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
TEQTIVITY INC	82-3883113	0.01	1121
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
GUARDHOUSE	32-0758900	0.01	1793
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
RANKSHARKS INC	82-3055592	0.08	16129

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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
SWAP COMMERCE INC	98-1752902	0.26	52690
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
GOOD KARMA KARACREATIONS LLC	39-2508360	0.01	1250
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
EZYCOLLECT INC	35-2780353	0.01	1840
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
RANA ANALYTICS LLC	87-1653434	0.17	785183
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
NEXAR INC	47-2720859	0.01	2248
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
EASTSIDE GAMES USA INC	30-1272445	0.18	34995
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MOOVE AV US LLC	99-4448046	0.62	164031
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ACCREDIT SOLUTIONS INC	61-1949053	0.03	167462
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CIO LANDING INC	36-4287672	0.01	31370

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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
DEXA AI	92-2261271	0.09	16820
CINCHY USA INC	61-2166938	0.13	62235
MIRRORWEB INC	32-0578428	0.86	169453
LEGENDS OF VENARI	87-3497719	0.01	20223
PURPLE APPLE LLC	99-3558729	0.51	552579
TVG CONSULTING LLC	99-4374891	0.38	69290
AVIDITY EVENTS LLC	99-4437042	0.32	220041
HEADPHONES INC	82-0658925	0.11	31886
SELECT PROPERTIES INC DBA SELECT ROW	85-0388553	1.54	1719623

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EQUIDIGITAL INC DBA JUMPR	93-2235506	0.06	39964
TOUTON USA	75-3269092	0.19	271640
CAPITAL LINK GREEN HOLDING INC	99-3179666	0.06	21114
JEWISH BOOK COUNCIL	13-3737760	0.07	24361
FIME NORTH AMERICA LLC	99-1286936	3.31	1350396
DEALCATALYST INC	87-3613241	0.16	51006
HOSTAWAY US LLC	99-4869267	1.63	892102
WALR USA INC	86-3866856	0.43	152000
ATLAS VMS INC	92-0944878	0.34	203043

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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
STOIC TECHNOLOGY CORPORATION DBA FORMDR	83-1405532	0.32	329049
SEM USA CORP	30-1397815	0.08	21130
FREE2MOVE NORTH AMERICA INC	82-4806319	0.56	912353
VAIRE COMPUTING INC	99-1291609	0.27	125926
AMIUS AMERICAS CORP	38-4042827	0.86	808048
CHEQROOM USA LLC	92-1661369	0.60	276091
PAT MCGRATH COSMETICS LLC DBA PAT MCGRATH LABS	47-3833615	0.84	2662858
YOTTA AUTOMATED SOFTWARE SOLUTIONS INC	87-1631475	0.44	113030
BUILT ENVIRONMENT OPTIMISATION LLC	30-1364668	0.04	44711

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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
HAMINA WIRELESS INC	93-1672560	0.20	51376
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
WAYTRADE US LLC	99-1584316	0.20	32991
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SPRYKER SYSTEMS AMERICA INC	37-1993181	0.86	1034035
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
THE CARPENTRIES INC	92-1581581	0.18	50109
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MAXHUB US INC	36-5007713	0.22	96699
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PAGE TECHNOLOGY INC	99-3891094	0.15	70575
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
QWILR INC	36-4962615	0.35	777677
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
GOMBOC AI INC	88-2277252	0.78	255876
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
UNIONBRANDS LLC	92-4015464	0.02	4605

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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
ALTITUDE CONTROL TECHNOLOGY LLC	86-3969559	0.06	88009
ELEVEN LABS INC	88-2721123	3.80	1686218
CARRICK US SERVICES COMPANY LLC	84-3881310	0.27	1279754
FORM FACTORY	82-5178433	0.09	38449
WILDBOOM CORPORATION	81-1119069	0.42	651980
SYNEX INC	85-1393374	0.44	108909
JACQUEMUS LAMERIQUE LLC	37-2121229	0.23	68095
FOURCORTERS INC	99-3277271	0.03	6826
LIGHTNING STEP TECHNOLOGIES LLC	81-1718416	0.86	752379

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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
MISTRAL AI INC	99-0657949	5.91	2450478
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CHECKBOX SOFTWARE INC	93-4623997	0.21	54006
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
VYDE INC	99-1235493	0.02	7136
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
GENBIOAI INC	99-2788760	0.73	220410
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
HOBBS EAST LLC	46-4460678	0.13	112142
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MEERO CORP	35-2834683	0.22	76553
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CHANNELENGINE INC	86-2777351	0.48	342670
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ELMERS MANUFACTURING INC	38-4167260	0.09	18638
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
KINTSUGIAI INC	88-4344201	1.50	354023

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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
LAETRO INC	85-2270431	0.04	49628
2a Name of Participating Employer KUBERNETES INNOVATION LABS LLC	86-2933032	0.21	259655
2a Name of Participating Employer THE WALL STREET EXPERIENCE LLC	90-0491695	0.09	34804
2a Name of Participating Employer 240 TECH LLC	82-1007877	0.01	16964
2a Name of Participating Employer AUTIFY INC	81-3777944	0.07	68304
2a Name of Participating Employer STRONG COMPUTE SERVICES CORPORATION	99-1629329	0.02	8497
2a Name of Participating Employer AOMNI INC	85-3834260	0.17	73216
2a Name of Participating Employer SILENT PUSH INC	35-2689252	0.58	206877
2a Name of Participating Employer RUNNA	37-2144360	0.12	77094

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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
LIMBIC INC	38-4311296	0.18	85545
TROOP TRAVEL INC	87-3169821	0.51	564515
MEDIS MEDICAL IMAGING SYSTEMS INC	43-1997910	0.52	761943
DUENDE SOFTWARE LLC	85-2486343	0.36	95389
SUMMA ADVISERS LLC	98-1811273	0.41	145635
SCOUTBEE INC	83-3152008	0.00	0
EYEPOPAI INC	92-1905090	0.19	87355
MIDSUMMER STUDIOS INC	93-1724996	0.56	361044
TYPEFORM US LLC	82-2393796	2.36	2702923

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Part II Participating Employer Information (Continued).

Use this page for additional participating employer information.

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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
MALTEGO US INC	30-1408625	0.22	62198
CHAIZ INC	38-4232558	0.04	18992
NCOMPASS TECHNOLOGIES INC	36-5091911	0.02	9051
GITPOD INC	85-2446507	0.57	235759
PHINYXAI	99-0554584	0.01	23657
DALET DIGITAL MEDIA SYSTEMS USA INC	13-3771154	1.59	4493706
TRICON INFOTECH LLC	81-0958112	0.11	34880
ECO STOR INC	92-3882903	0.07	20779
NIX USA INC	32-0487125	0.47	213175

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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
STRUCTURED SOCIAL LLC	81-5272895	0.19	91854
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
GETTHERE LLC	30-1010950	1.53	588411
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SYRE INC	47-4589510	0.85	596340
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SAFE ARTIFICIAL INTELLIGENCE FORUM INSTITUTE	93-4950919	0.15	47147
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
RHINOAI	36-4961887	1.24	554674
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
GENSYN INC	61-2081820	0.98	448100
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SCOREPLAY INC	92-0919228	0.20	121413
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MODERN FANATIC LLC	85-2499433	0.05	15614
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
EXTRAYEAR AI	99-2733557	0.47	174827

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BRACELET USA LLC	61-2213402	0.29	333950
MALBEC LABS LLC	99-4818335	0.40	132024
4G44 ESPORTS INC	83-2619226	0.07	86173
CAKEWALK ENTERTAINMENT LLC	82-2146389	0.24	196804
METHODICAL SERVICES LLC	86-3778860	0.37	233758
RECAST LABS INC	87-3698050	1.62	1281482
AEROCLOUD SYSTEMS INC	35-2616665	0.27	168178
SUPPLY WISDOM INC	84-4016410	0.71	1087419
ARCHTIS US INC	83-2038058	0.19	255718

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BELLROY OPERATIONS AMERICAS INC	30-1256945	0.34	291116
BEREAL INC	87-2503004	0.28	97005
CACHENETWORKS LLC	37-1488462	0.82	931825
DREADNODE INC	93-3906695	0.85	319584
ENVISICS INC	85-2845745	0.50	1104745
FITXR USA INC	85-4177437	0.16	126401
FLUID STACK INC	36-5007834	1.45	415983
FUSION SPECIALTY AMERICAS INSURANCE SERVICES LLC	85-0829272	0.08	0
HAMSTER GARAGE LLC	83-4476003	0.13	141787

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HOOK POINT LLC	85-4158285	0.00	755
ID5 TECHNOLOGY INC	86-3236779	0.92	1272796
INNOVAMAT EDUCATION INC	88-1600717	0.52	172537
LAUNDRIESUCKSIO INC	83-1547288	0.37	367568
MIGHTY CULTURES LLC	92-2349911	0.07	53047
NEAR ONE US CORP	99-1530567	0.27	106742
NETSOFT HOLDINGS LLC DBA HUBSTAFF	46-1176221	0.80	1336331
ONELEET INC	36-5032549	0.19	102401
OTTO DMS INC	99-0679076	0.39	673813

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PRIME MOVER LLC	99-4717728	1.37	523676
RATIONAL ANIMATIONS INC	99-1838037	0.08	40692
REMO HEALTH INC PARTICIPATING EMPLOYERS	84-2729300	2.64	1670499
RISK LABS USA INC	83-1325649	0.56	761490
SEQERA INC	36-5106046	1.71	830340
SOURCEAG LLC	99-4797571	0.07	23543
SUPERMOVE INC	61-1937019	0.48	83
SWINGVISION INC	47-4406128	0.78	688057
TANTALUM LABS LLC	99-0972929	0.17	41109

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THIRTEEN23 CORP	22-3944732	0.26	1415652
LYNC HOLDCO INC	93-2074880	0.00	55817
SUPERFILATE INC	86-2104557	0.19	64346
1MONEY TECHNOLOGIES INC	99-3891782	0.24	202868
GETRESPONSE INC	81-5277653	0.03	7438
HALO MEDIA LLC	20-5187538	1.08	2221641
REDSNACK TECHNOLOGIES INC	93-1623549	0.06	19485
ALGOVERDE	87-2848609	0.05	10416
MOOVE CARS MOBILITY USA CORP	38-4321314	1.13	344120

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MYFUNDED FUTURES LLC	93-3765771	0.33	265531
GLOBAL RESILIENT CITIES NETWORK	85-0990988	0.23	482798
CRADLE TO CRADLE PRODUCTS INNOVATION INSTITUTE INC	27-1832830	0.40	932560
PORT53 TECHNOLOGIES INC	82-2440994	1.30	1645863
PYPESTREAM INC	32-0465480	1.00	2518722
DTERRA SOLUTIONS LLC	45-4798693	0.45	4078023
MAG45 INC	35-2568242	0.16	167195
QUESTAR AUTO TECHNOLOGIES INC	36-4879192	0.07	74192
REEF EMPLOYER LLC	85-3300744	0.17	34493

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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
SYSTEM PAY SERVICES US INC DBA BVNK	93-2808285	1.09	220566
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
RESONANT LINK MEDICAL INC	33-2013025	0.34	132685
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
LEGORA INC	37-2115556	0.56	107604
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
EPIKAST INC	88-3245110	0.15	29849
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
EVERWAVE INC	99-3501041	0.25	51870
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MATHPIX INC	81-1623042	0.68	140716
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ZAELOT INC	85-3940780	0.03	5163
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CHRYSOS AMERICA LLC	93-3196683	0.22	44081
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ANALOG AI INC	99-5080533	0.20	38858

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UPSTART CYBER LLC	85-3727052	0.20	41101
POLLY KING CO	37-1739892	0.00	155760
VENCHI US INC	38-3990077	0.79	968729
KITA INSURANCE SOLUTIONS LIMITED	93-4325210	0.05	81556
SPLINE INC	36-4963683	0.28	58410
MOMENTUM CONTROLS SOFTWARE AND SERVICES USA INC	92-3031426	0.02	3201
DIRECTIONAL CAPITAL SERVICES LLC	33-3142234	0.14	29230
AVENOR RESEARCH LLC	33-1884103	0.00	461
HILTON GLOBAL ASSOCIATES INC	84-4536164	1.01	877471

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KUBRICK CONSULTING INC	86-2613908	2.27	2448591
ENGAGINGIO	33-4764387	0.04	61429
TDCNA INC DBA TIMEXTENDER	46-1427004	0.67	1393486
LEIA INC	32-0424200	1.29	6551394
CALEB AND BROWN LIMITED	37-2116315	0.24	48426
SHIFT ENTERPRISES LLC DBA VIVO TECHNOLOGIES	84-2853492	0.19	36495
SILKTIDE INC	83-3562089	0.35	172493
DASH0 INC	92-2680703	0.09	122390
RESTOKE INC	30-1423247	0.14	28422

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CKAF ASSOCIATES	47-4950901	0.09	88201
DOURO LABS LLC	93-2546386	0.81	216252
AUTERION INC	83-3920523	1.56	2078507
APARAVI SOFTWARE CORP	81-4064951	0.30	513867
STRATOSPHERE STUDIO LLC	33-4746056	0.04	8013
FIREFLY NEUROSCIENCE INC	54-1167364	0.25	46598
SILVER LAKE DIGITAL INC	82-3833659	0.03	0
DEFI DEVELOPMENT CORP	83-2676794	0.31	61630
SENSEMITTER CORPORATION	33-4606638	0.01	2547

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CLARITY AI INC	81-5230730	0.26	556516
HEYCO ENERGY GROUP INC	75-3008779	0.62	3979148
GLOBAL JOURNAL MEDIA CORP	93-3980469	0.04	7459
BROKER GENIUS INC DBA AUTOMATIQ	81-2100564	3.06	6386040
SCALA TEAMS LLC	33-3851933	0.09	164280
TAURUS BIDCO LLC	33-4176870	0.26	89278
RTCAMP INC	38-4040491	0.01	2626
SORACOM GLOBAL INC	81-3659159	0.96	2667975
GOOD ALMA GROUP LLC	82-5001323	0.27	52897

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LABRA VENTURES INC	86-2184632	0.12	22939
SH STUDIO INC	88-1232856	0.04	8667
HADRIAN SECURITY INC	33-3556652	0.17	33669
FOLIO SERVICES INC	93-1386207	0.29	58123
NOOIE LLC	83-4142631	0.13	24974
TEMA ETFS LLC	93-3388004	0.17	47024
CORDIER USA LLC	27-1732345	0.16	239840
KASTHALL NORTH AMERICA INC	82-4612283	0.02	3293
MULTIVERSE COMPUTING LLC	38-4340622	0.05	10502

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MARTIAL ARTS ON RAILS LLC DBA GYMDESK	84-2840083	0.14	258615
LIVEHIRE US INC	84-2591555	0.02	278208
REACTIVE MARKETS LLC	38-4307487	0.08	17480
LETTERBOXD US INC	39-2793979	0.17	38959
NETWORK TEST LABS LLC DBA CYBERCLAN	61-1951792	0.06	11018
GUARDARE INC	93-4954486	0.12	23048
ELYSIAN STRATEGIC MARKETING INC DBA ROBIN	85-3108132	0.08	201512
JIT INC	85-1604910	0.07	106908
ATHENA US CORP	33-3908800	1.35	688918

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Part II Participating Employer Information (Continued).

Use this page for additional participating employer information.

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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
TEQTIVITY INC	82-3883113	0.01	1121
GUARDHOUSE	32-0758900	0.01	1793
RANKSHARKS INC	82-3055592	0.08	16129
SWAP COMMERCE INC	98-1752902	0.26	52690
GOOD KARMA KARACREATIONS LLC	39-2508360	0.01	1250
EZYCOLLECT INC	35-2780353	0.01	1840
RANA ANALYTICS LLC	87-1653434	0.17	785183
NEXAR INC	47-2720859	0.01	2248
EASTSIDE GAMES USA INC	30-1272445	0.18	34995

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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
MOOVE AV US LLC	99-4448046	0.62	164031
ACCREDIT SOLUTIONS INC	61-1949053	0.03	167462
CIO LANDING INC	36-4287672	0.01	31370
DEXA AI	92-2261271	0.09	16820
CINCHY USA INC	61-2166938	0.13	62235
CINCHY USA INC	61-2166938	0.13	62235
MIRRORWEB INC	32-0578428	0.86	169453
LEGENDS OF VENARI	87-3497719	0.01	20223
PURPLE APPLE LLC	99-3558729	0.51	552579

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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
TVG CONSULTING LLC	99-4374891	0.38	69290
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
AVIDITY EVENTS LLC	99-4437042	0.32	220041
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
HEADPHONES INC	82-0658925	0.11	31886
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SELECT PROPERTIES INC DBA SELECT ROW	85-0388553	1.54	1719623
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
EQUDIGITAL INC DBA JUMPR	93-2235506	0.06	39964
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
TOUTON USA	75-3269092	0.19	271640
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CAPITAL LINK GREEN HOLDING INC	99-3179666	0.06	21114
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
JEWSH BOOK COUNCIL	13-3737760	0.07	24361
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
FIME NORTH AMERICA LLC	99-1286936	3.31	1350396

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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
DEALCATALYST INC	87-3613241	0.16	51006
HOSTAWAY US LLC	99-4869267	1.63	892102
WALR USA INC	86-3866856	0.43	152000
ATLAS VMS INC	92-0944878	0.34	203043
STOIC TECHNOLOGY CORPORATION DBA FORMDR	83-1405532	0.32	329049
SEM USA CORP	30-1397815	0.08	21130
FREE2MOVE NORTH AMERICA INC	82-4806319	0.56	912353
VAIRE COMPUTING INC	99-1291609	0.27	125926
AMIUS AMERICAS CORP	38-4042827	0.86	808048

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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
CHEQROOM USA LLC	92-1661369	0.60	276091
PAT MCGRATH COSMETICS LLC DBA PAT MCGRATH LABS	47-3833615	0.84	2662858
YOTTA AUTOMATED SOFTWARE SOLUTIONS INC	87-1631475	0.44	113030
BUILT ENVIRONMENT OPTIMISATION LLC	30-1364668	0.04	44711
HAMINA WIRELESS INC	93-1672560	0.20	51376
WAYTRADE US LLC	99-1584316	0.20	32991
SPRYKER SYSTEMS AMERICA INC	37-1993181	0.86	1034035
THE CARPENTRIES INC	92-1581581	0.18	50109
MAXHUB US INC	36-5007713	0.22	96699

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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
PAGE TECHNOLOGY INC	99-3891094	0.15	70575
QWILR INC	36-4962615	0.35	777677
GOMBOC AI INC	88-2277252	0.78	255876
UNIONBRANDS LLC	92-4015464	0.02	4605
ALTITUDE CONTROL TECHNOLOGY LLC	86-3969559	0.06	88009
ELEVEN LABS INC	88-2721123	3.80	1686218
CARRICK US SERVICES COMPANY LLC	84-3881310	0.27	1279754
FORM FACTORY	82-5178433	0.09	38449
WILDBOOM CORPORATION	81-1119069	0.42	651980

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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
SYNEX INC	85-1393374	0.44	108909
JACQUEMUS LAMERIQUE LLC	37-2121229	0.23	68095
FOURCORTERS INC	99-3277271	0.03	6826
LIGHTNING STEP TECHNOLOGIES LLC	81-1718416	0.86	752379
MISTRAL AI INC	99-0657949	5.91	2450478
CHECKBOX SOFTWARE INC	93-4623997	0.21	54006
VYDE INC	99-1235493	0.02	7136
GENBIOAI INC	99-2788760	0.73	220410
HOBBS EAST LLC	46-4460678	0.13	112142

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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
MEERO CORP	35-2834683	0.22	76553
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CHANNELENGINE INC	86-2777351	0.48	342670
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ELMERS MANUFACTURING INC	38-4167260	0.09	18638
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
KINTSUGIAI INC	88-4344201	1.50	354023
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
LAETRO INC	85-2270431	0.04	49628
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
KUBERNETES INNOVATION LABS LLC	86-2933032	0.21	259655
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
THE WALL STREET EXPERIENCE LLC	90-0491695	0.09	34804
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
240 TECH LLC	82-1007877	0.01	16964
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
AUTIFY INC	81-3777944	0.07	68304

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STRONG COMPUTE SERVICES CORPORATION	99-1629329	0.02	8497
AOMNI INC	85-3834260	0.17	73216
SILENT PUSH INC	35-2689252	0.58	206877
RUNNA	37-2144360	0.12	77094
LIMBIC INC	38-4311296	0.18	85545
TROOP TRAVEL INC	87-3169821	0.51	564515
MEDIS MEDICAL IMAGING SYSTEMS INC	43-1997910	0.52	761943
DUENDE SOFTWARE LLC	85-2486343	0.36	95389
SUMMA ADVISERS LLC	98-1811273	0.41	145635

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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
SCOUTBEE INC	83-3152008	0.00	
EYEPOPAI INC	92-1905090	0.19	87355
MIDSUMMER STUDIOS INC	93-1724996	0.56	361044
TYPEFORM US LLC	82-2393796	2.36	2702923
MALTEGO US INC	30-1408625	0.22	62198
CHAIZ INC	38-4232558	0.04	18992
NCOMPASS TECHNOLOGIES INC	36-5091911	0.02	9051
GITPOD INC	85-2446507	0.57	235759
PHINYXAI	99-0554584	0.01	23657

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DALET DIGITAL MEDIA SYSTEMS USA INC	13-3771154	1.59	4493706
TRICON INFOTECH LLC	81-0958112	0.11	34880
ECO STOR INC	92-3882903	0.07	20779
NIX USA INC	32-0487125	0.47	213175
STRUCTURED SOCIAL LLC	81-5272895	0.19	91854
GETTHERE LLC	30-1010950	1.53	588411
SYRE INC	47-4589510	0.85	596340
SAFE ARTIFICIAL INTELLIGENCE FORUM INSTITUTE	93-4950919	0.15	47147
RHINOAI	36-4961887	1.24	554674

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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
GENSYN INC	61-2081820	0.98	448100
SCOREPLAY INC	92-0919228	0.20	121413
MODERN FANATIC LLC	85-2499433	0.05	15614
EXTRAYEAR AI	99-2733557	0.47	174827
BRACELET USA LLC	61-2213402	0.29	333950
MALBEC LABS LLC	99-4818335	0.40	132024
4G44 ESPORTS INC	83-2619226	0.07	86173
CAKEWALK ENTERTAINMENT LLC	82-2146389	0.24	196804
METHODICAL SERVICES LLC	86-3778860	0.37	233758

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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
RECAST LABS INC	87-3698050	1.62	1281482
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
AEROCLOUD SYSTEMS INC	35-2616665	0.27	168178
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SUPPLY WISDOM INC	84-4016410	0.71	1087419
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ARCHTIS US INC	83-2038058	0.19	255718
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
BELLROY OPERATIONS AMERICAS INC	30-1256945	0.34	291116
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
BEREAL INC	87-2503004	0.28	97005
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CACHENETWORKS LLC	37-1488462	0.82	931825
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
DREADNODE INC	93-3906695	0.85	319584
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ENVISICS INC	85-2845745	0.50	1104745

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FITXR USA INC	85-4177437	0.16	126401
FLUID STACK INC	36-5007834	1.45	415983
FUSION SPECIALTY AMERICAS INSURANCE SERVICES LLC	85-0829272	0.08	
HAMSTER GARAGE LLC	83-4476003	0.13	141787
HOOK POINT LLC	85-4158285	0.00	755
ID5 TECHNOLOGY INC	86-3236779	0.92	1272796
INNOVAMAT EDUCATION INC	88-1600717	0.52	172537
LAUNDRIESUCKSIO INC	83-1547288	0.37	367568
MIGHTY CULTURES LLC	92-2349911	0.07	53047

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Part II Participating Employer Information (Continued).

Use this page for additional participating employer information.

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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
NEAR ONE US CORP	99-1530567	0.27	106742
2a Name of Participating Employer NETSOFT HOLDINGS LLC DBA HUBSTAFF	46-1176221	0.80	1336331
2a Name of Participating Employer ONELEET INC	36-5032549	0.19	102401
2a Name of Participating Employer OTTO DMS INC	99-0679076	0.39	673813
2a Name of Participating Employer PRIME MOVER LLC	99-4717728	1.37	523676
2a Name of Participating Employer RATIONAL ANIMATIONS INC	99-1838037	0.08	40692
2a Name of Participating Employer REMO HEALTH INC PARTICIPATING EMPLOYERS	84-2729300	2.64	1670499
2a Name of Participating Employer RISK LABS USA INC	83-1325649	0.56	761490
2a Name of Participating Employer SEQERA INC	36-5106046	1.71	830340

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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
SOURCEAG LLC	99-4797571	0.07	23543
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SUPERMOVE INC	61-1937019	0.48	83
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SWINGVISION INC	47-4406128	0.78	688057
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
TANTALUM LABS LLC	99-0972929	0.17	41109
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
THIRTEEN23 CORP	22-3944732	0.26	1415652
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
LYNC HOLDCO INC	93-2074880	0.00	55817
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SUPERFILIATE INC	86-2104557	0.19	64346
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
1MONEY TECHNOLOGIES INC	99-3891782	0.24	202868
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
GETRESPONSE INC	81-5277653	0.03	7438

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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
HALO MEDIA LLC	20-5187538	1.08	2221641
REDSNACK TECHNOLOGIES INC	93-1623549	0.06	19485
ALGOVERDE	87-2848609	0.05	10416
MOOVE CARS MOBILITY USA CORP	38-4321314	1.13	344120
MYFUNDED FUTURES LLC	93-3765771	0.33	265531
GLOBAL RESILIENT CITIES NETWORK	85-0990988	0.23	482798
CRADLE TO CRADLE PRODUCTS INNOVATION INSTITUTE INC	27-1832830	0.40	932560
PORT53 TECHNOLOGIES INC	82-2440994	1.30	1645863
PYPESTREAM INC	32-0465480	1.00	2518722

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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
DTERRA SOLUTIONS LLC	45-4798693	0.45	4078023
MAG45 INC	35-2568242	0.16	167195
QUESTAR AUTO TECHNOLOGIES INC	36-4879192	0.07	74192
REEF EMPLOYER LLC	85-3300744	0.17	34493
SYSTEM PAY SERVICES US INC DBA BVNK	93-2808285	1.09	220566
RESONANT LINK MEDICAL INC	33-2013025	0.34	132685
LEGORA INC	37-2115556	0.56	107604
EPIKAST INC	88-3245110	0.15	29849
EVERWAVE INC	99-3501041	0.25	51870

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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
MATHPIX INC	81-1623042	0.68	140716
ZAELOT INC	85-3940780	0.03	5163
CHRYOSOS AMERICA LLC	93-3196683	0.22	44081
ANALOG AI INC	99-5080533	0.20	38858
UPSTART CYBER LLC	85-3727052	0.20	41101
POLLY KING CO	37-1739892	0.00	155760
VENCHI US INC	38-3990077	0.79	968729
KITA INSURANCE SOLUTIONS LIMITED	93-4325210	0.05	81556
SPLINE INC	36-4963683	0.28	58410

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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
MOMENTUM CONTROLS SOFTWARE AND SERVICES USA INC	92-3031426	0.02	3201
DIRECTIONAL CAPITAL SERVICES LLC	33-3142234	0.14	29230
AVENOR RESEARCH LLC	33-1884103	0.00	461
HILTON GLOBAL ASSOCIATES INC	84-4536164	1.01	877471
KUBRICK CONSULTING INC	86-2613908	2.27	2448591
ENGAGINGIO	33-4764387	0.04	61429
TDCNA INC DBA TIMEXTENDER	46-1427004	0.67	1393486
LEIA INC	32-0424200	1.29	6551394
CALEB AND BROWN LIMITED	37-2116315	0.24	48426

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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
SHIFT ENTERPRISES LLC DBA VIVO TECHNOLOGIES	84-2853492	0.19	36495
SILKTIDE INC	83-3562089	0.35	172493
DASH0 INC	92-2680703	0.09	122390
RESTOKE INC	30-1423247	0.14	28422
CKAF ASSOCIATES	47-4950901	0.09	88201
DOURO LABS LLC	93-2546386	0.81	216252
AUTERION INC	83-3920523	1.56	2078507
APARAVI SOFTWARE CORP	81-4064951	0.30	513867
STRATOSPHERE STUDIO LLC	33-4746056	0.04	8013

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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
FIREFLY NEUROSCIENCE INC	54-1167364	0.25	46598
SILVER LAKE DIGITAL INC	82-3833659	0.03	
DEFI DEVELOPMENT CORP	83-2676794	0.31	61630
SENSEMITTER CORPORATION	33-4606638	0.01	2547
CLARITY AI INC	81-5230730	0.26	556516
HEYCO ENERGY GROUP INC	75-3008779	0.62	3979148
GLOBAL JOURNAL MEDIA CORP	93-3980469	0.04	7459
BROKER GENIUS INC DBA AUTOMATIQ	81-2100564	3.06	6386040
SCALA TEAMS LLC	33-3851933	0.09	164280

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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
TAURUS BIDCO LLC	33-4176870	0.26	89278
RTCAMP INC	38-4040491	0.01	2626
SORACOM GLOBAL INC	81-3659159	0.96	2667975
GOOD ALMA GROUP LLC	82-5001323	0.27	52897
LABRA VENTURES INC	86-2184632	0.12	22939
SH STUDIO INC	88-1232856	0.04	8667
HADRIAN SECURITY INC	33-3556652	0.17	33669
FOLIO SERVICES INC	93-1386207	0.29	58123
NOOIE LLC	83-4142631	0.13	24974

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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
TEMA ETFS LLC	93-3388004	0.17	47024
CORDIER USA LLC	27-1732345	0.16	239840
KASTHALL NORTH AMERICA INC	82-4612283	0.02	3293
MULTIVERSE COMPUTING LLC	38-4340622	0.05	10502
MARTIAL ARTS ON RAILS LLC DBA GYMDESK	84-2840083	0.14	258615
LIVEHIRE US INC	84-2591555	0.02	278208
REACTIVE MARKETS LLC	38-4307487	0.08	17480
LETTERBOXD US INC	39-2793979	0.17	38959
NETWORK TEST LABS LLC DBA CYBERCLAN	61-1951792	0.06	11018

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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
GUARDARE INC	93-4954486	0.12	23048
2a Name of Participating Employer ELYSIAN STRATEGIC MARKETING INC DBA ROBIN	85-3108132	0.08	201512
2a Name of Participating Employer JIT INC	85-1604910	0.07	106908
2a Name of Participating Employer ATHENA US CORP	33-3908800	1.35	688918
2a Name of Participating Employer TEQTIVITY INC	82-3883113	0.01	1121
2a Name of Participating Employer GUARDHOUSE	32-0758900	0.01	1793
2a Name of Participating Employer RANKSHARKS INC	82-3055592	0.08	16129
2a Name of Participating Employer SWAP COMMERCE INC	98-1752902	0.26	52690
2a Name of Participating Employer GOOD KARMA KARACREATIONS LLC	39-2508360	0.01	1250

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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
EZYCOLLECT INC	35-2780353	0.01	1840
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
RANA ANALYTICS LLC	87-1653434	0.17	785183
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
NEXAR INC	47-2720859	0.01	2248
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
EASTSIDE GAMES USA INC	30-1272445	0.18	34995
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MOOVE AV US LLC	99-4448046	0.62	164031
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ACCREDIT SOLUTIONS INC	61-1949053	0.03	167462
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CIO LANDING INC	36-4287672	0.01	31370
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
DEXA AI	92-2261271	0.09	16820
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 _____

DEEL PEO RETIREMENT PLAN

Financial Statements
December 31, 2025 and 2024



DEEL PEO RETIREMENT PLAN
Table of Contents
December 31, 2025 and 2024

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Independent Auditor's Report	1
Statement of Net Assets Available for Benefits	4
Statement of Changes in Net Assets Available for Benefits	5
Notes to Financial Statements	6
 Supplemental Schedules	
Schedule H, Line 4i Schedule of Assets (Held at End of Year)	11
Schedule H, Line 4a Schedule of Delinquent Participant Contributions	12
 Note:	
All other schedules required by Section 2520.103-10 of the Department of Labor's Rules and Regulations for reporting and Disclosure under the Employee Retirement Income Securities Act of 1974 have been omitted because they are not applicable.	



INDEPENDENT AUDITOR'S REPORT

To the Participants in and Administrator of
Deel PEO Retirement Plan

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

We have performed audits of the accompanying financial statements of Deel PEO Retirement Plan, an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), as permitted by ERISA Section 103(a)(3)(C) [ERISA Section 103(a)(3)(C) audit]. The financial statements comprise the statement of net assets available for benefits as of December 31, 2025, and the related statement of changes in net assets available for benefits for the year ended December 31, 2025, and the related notes to the financial statements.

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

Management has obtained certifications from a qualified institution as of December 31, 2025, and for the year ended December 31, 2025, stating that the certified investment information, as described in Note F to the financial statements, is complete and accurate.

Opinion

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

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

Basis for Opinion

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

Responsibilities of Management for the Financial Statements

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

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

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

Auditor's Responsibilities for the Audit of the Financial Statements

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

In performing an audit in accordance with GAAS, we:

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

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

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

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

Supplemental Schedules Required by ERISA

The supplemental schedules, Schedule H, Line 4i Schedule of Assets (Held at End of Year) as of December 31, 2025 and Schedule H, Line 4a Schedule of Delinquent Participant Contributions for the year ended December 31, 2025, are presented for purposes of additional analysis and are not a required part of the financial statements but are supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedules, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS. For information included in the supplemental schedules that agreed to or are 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 are 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 schedule related to assets held by and certified to by a qualified institution agrees to, or are 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).

A handwritten signature in black ink that reads "Metz CPA PLLC".

Phoenix, Arizona
July 27, 2026

DEEL PEO RETIREMENT PLAN
Statement of Net Assets Available for Benefits
December 31, 2025

	<u>2025</u>
ASSETS	
Investments, at fair value:	
Mutual funds	\$ 97,701,232
Money market fund	<u>1,283,252</u>
Total investments	98,984,484
Receivables:	
Loan payment receivable	6,109
Employee contributions	952,419
Employer contributions	451,427
Notes receivable from participants	<u>733,747</u>
Total assets	101,128,186
LIABILITIES	
Excess contributions payable	<u>48,538</u>
NET ASSETS AVAILABLE FOR BENEFITS	<u><u>\$ 101,079,648</u></u>

See accompanying notes to financial statements.

DEEL PEO RETIREMENT PLAN
Statement of Changes in Net Assets Available for Benefits
Year Ended December 31, 2025

ADDITIONS

Investment income:	
Net appreciation in fair value investments	\$ 5,076,151
Interest and dividend income	2,164,412
Total investment income	7,240,563
Interest income on notes receivable from participants	24,863
Contributions:	
Participant	14,788,649
Employer	6,362,153
Other including rollover	3,634,459
TOTAL ADDITIONS	32,050,687

DEDUCTIONS

Benefits paid to participants	6,011,277
Administrative expenses	335,770
TOTAL DEDUCTIONS	6,347,047
NET INCREASE	25,703,640
TRANSFERS OF ASSETS TO THIS PLAN	76,839,733
TRANSFERS OF ASSETS FROM THIS PLAN	(1,463,725)
NET ASSETS AVAILABLE FOR BENEFITS	
BEGINNING OF YEAR	-
END OF YEAR	\$ 101,079,648

See accompanying notes to financial statements.

DEEL PEO RETIREMENT PLAN
Notes to Financial Statements
December 31, 2025

NOTE A – DESCRIPTION OF PLAN

The following description of the Deel PEO Retirement Plan (“Plan”) provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan’s provisions.

General – The Plan is a Multiple Employer retirement Plan (“MEP”), effective April 1, 2025, with approval of the Board of Directors of Deel, PEO, LLC (“Plan Sponsor”), a professional employer organization in which employees participating in the Plan are offered participation as benefit of their co-employment with the Plan Sponsor. The Plan was established, and is intended to qualify, under Internal Revenue Code (“IRC”) section 413(c), as updated and amended by the Setting Every Community Up for Retirement Enhancement Act of 2019 (the “SECURE Act”). The Plan is a defined contribution plan covering eligible employees of participating employers. Each participating employer elects their own provisions related to eligibility, contributions, notes receivable from participants, vesting, and payments of benefits. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (“ERISA”).

Participating employers in the MEP may have different plan provisions for their respective participating employees. Accordingly, each adopting employers executes an adoption agreement with terms and conditions specific to such employer. Employees of participating employers who are not excluded by certain provisions in the plan document may enter the Plan on various entry dates coinciding with or following the date on which those employees meet the eligibility requirements as outlined with their respective employer’s adoption agreement

Contributions – Each year, participants may contribute pretax annual compensation (as defined in the Plan) up to the limits defined by law, or as defined by the adopting employer agreement. Participants also may designate all or a portion of their deferral contributions as after tax contributions into a Roth account. Participants who have attained age 50 before the end of the plan year are eligible to make catch-up contributions. Participants may also contribute amounts representing distributions from other qualified plans (rollover). Participants direct the investment of their contributions into the investment options offered by the Plan. The Plan includes auto-enrollment provisions for certain participating employers whereby all newly eligible employees are automatically enrolled in the Plan unless they affirmatively elect not to participate in the Plan. Automatically enrolled participants have their deferral rate set between 3% and 8% of eligible compensation, depending on the adopting employer election, and their contributions invested in a designated balanced fund until changed by the participant, with incremental increases every year up to a maximum percentage set forth in the adopting employer agreement. Participating employers of the Plan Sponsor may elect to contribute safe harbor matching contributions, discretionary matching contributions, and discretionary profit-sharing contributions. Discretionary matching and profit-sharing contributions to the Plan differ based on formulas set forth by each participating employer. For 2025, discretionary profit-sharing contributions across all participating employers totaled \$1,091,606. Contributions are subject to certain Internal Revenue Service (“IRS”) limitations.

Participant Accounts – Each participant’s account is credited with the participant’s contribution and allocations of (a) the Adopting Employer’s contribution and (b) Plan earnings (losses), and charged with an allocation of administrative expenses, as defined. 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.

Vesting – Participants are immediately vested in their contributions and employer safe harbor contributions, plus actual earnings thereon. Vesting of employer discretionary matching and profit-sharing contributions, plus earnings thereon, is based on various years of service. The vested portion of participant accounts containing discretionary employer contributions will be determined based on years of service with the adopting employer through the date of termination of employment with the adopting employer. The vesting schedule is determined by each adopting employer.

Payment of Benefits – On termination of service due to reasons other than death, vested interest will be received by the participant as a lump distribution as soon as administratively feasible after employment is terminated. If vested interest is \$5,000 or more the participant may elect installment payments over a specific period of time. Distributions upon death can be elected, by the beneficiary, as lump sum or equal installment payments.

DEEL PEO RETIREMENT PLAN
Notes to Financial Statements
December 31, 2025

NOTE A – DESCRIPTION OF PLAN (continued)

Notes Receivable from Participant – Subject to certain limitations in the plan document, participants may borrow from their fund accounts a minimum of \$1,000 up to a maximum equal to the lesser of \$50,000 or 50% of their vested account balance. The loans are secured by the balance in the participant's account and bear interest at rates which are commensurate with local prevailing rates as determined by the Plan administrator. Principal and interest is paid ratably through payroll deductions. Loan terms range up to 15 years for the purchase of a primary residence.

Forfeited Accounts – Any accumulated benefits forfeited during a Plan year due to participant withdrawal prior to full vesting may be applied to reduce employer contributions or to pay administrative expenses which would otherwise be paid by the Plan. Forfeited non-vested accounts totaled \$151,126 at December 31, 2025. Forfeitures of terminated non-vested account balances used to reduce employer contributions for the year ended December 31, 2025 totaled \$636.

NOTE B – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting – The accompanying financial statements are prepared on the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America ("U.S. GAAP").

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

Estimates – The preparation of financial statements in conformity with generally accepted accounting principles requires the Plan administrator to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results may differ from those estimates.

Investment Valuation and Income Recognition – The Plan's 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. See "Note G Fair Value Measurements" for discussion of Fair Value Measurements. In accordance with the policy of stating investments at fair value, the Plan presents, in the statement of changes in net assets available for benefits, the net appreciation (depreciation) in the fair value of its investments, which consists of the realized gains or losses and the unrealized appreciation (depreciation) on those investments. Dividends are recorded on the ex-dividend date. Interest income is recorded on an accrual basis. Purchase and sales of securities are recorded on a trade-date basis.

Excess Contributions Payable - Amounts payable to participants, totaling \$48,538, for contributions in excess of amounts allowed by the IRS are included in benefits paid to participants. The Plan distributed the 2025 excess contributions to the applicable participants subsequent to year-end.

Payment of Benefits – Benefits are recorded when paid.

Administration Expenses – Certain administrative 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 distribution and 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 of fair value of investments.

DEEL PEO RETIREMENT PLAN
Notes to Financial Statements
December 31, 2025

NOTE C – PLAN TERMINATION

Although it has not expressed any intent to do so, the Plan's sponsor has the right to terminate the Plan subject to the provisions of ERISA. In the event of whole or partial plan termination; participants would become fully vested as to the amount credited to their accounts after deductions for estimated liquidation and distribution expenses.

NOTE D – RISKS AND UNCERTAINTIES

The Plan invests in various investment securities which are exposed to various risks such as interest rate, market fluctuations, and credit risks. Due to the risk associated with certain investment securities, it is at least reasonably possible that changes in market values, interest rates, or other factors in the near term would materially affect participants' account balances as well as the amounts reported in the statement of net assets available for benefits and the statement of changes in net assets available for benefits.

NOTE E – TAX STATUS

The Plan uses a Non-Standardized, Pre-Approved, Profit Sharing Plan, provided by Slavic Integrated Administration, Inc. (dba Slavic), and has received an opinion letter dated June 30, 2020, from the IRS, which states that the non-standardized, pre-approved plan's form satisfies the applicable provisions of the IRC. The non-standardized pre-approved plan's opinion letter has been relied upon by the Plan. The Plan administrator believes the Plan is being operated in compliance with the applicable requirement of the IRC. Therefore, no provision for income taxes has been included in the Plan's financial statements.

U.S. GAAP requires 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 Department of Labor ("DOL") and IRS. The Plan administrator has analyzed the tax positions taken by the Plan, and has concluded that as of December 31, 2025, there are no uncertain positions taken or expected to be taken that would require recognition of a liability or disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any open tax periods in progress.

NOTE F – INFORMATION PREPARED AND CERTIFIED BY CUSTODIAN

The Plan administrator has elected the method of annual reporting compliance permitted by 29-CFR 2520.103-8 of the DOL's Rules and Regulations for Reporting and Disclosures under ERISA. Accordingly, Mid Atlantic Trust Company, the Custodian of the Plan, has certified as being complete and accurate the investments and notes receivable from participants on the statement of net assets available for benefits as of December 31, 2025, the investment and interest activity reflected in the statement of changes in net assets available for benefits, and the investment information included in the supplemental schedules of the financial statements as of and for the year ended December 31, 2025. Accordingly, as permitted under such election, the Plan administrator instructed the Plan's independent auditors not to perform any auditing procedures with respect to information certified as complete and accurate.

DEEL PEO RETIREMENT PLAN
Notes to Financial Statements
December 31, 2025

NOTE G – FAIR VALUE MEASUREMENTS

Accounting Standards Codification (ASC) 820 *Fair Value Measurements and Disclosures* (ASC 820), provides the framework for measuring fair value. Fair value of a financial instrument 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. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to unobservable inputs (Level 3 measurements). The three levels of the fair value hierarchy under ASC 820 are described as follows:

Level 1 Fair Value Measurements

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

Level 2 Fair Value Measurements

Inputs to the valuation methodology include:

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

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

Level 3 Fair Value Measurements

Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at December 31, 2025 and 2024.

Mutual Funds – Valued at the daily closing price as reported by the fund. Mutual funds held by the Plan are open-end mutual funds that are registered with the Securities and Exchange Commission. These funds are required to publish their daily net asset value (NAV) and to transact at that price. The mutual funds held by the Plan are deemed to be actively traded.

Money Market Fund – Valued at amortized cost, which approximates fair value. The amortized cost is determined by valuing it at its original cost and thereafter amortizing any discount or premium from its face value at a constant rate until maturity. Securities held by the money market fund are generally high quality and liquid; however, they are reflected as a Level 2 because the inputs used to determine fair value are not quoted prices in an active market.

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2025 and 2024.

	Assets at Fair Value as of December 31, 2025		
	Level 1	Level 2	Total
Mutual funds	\$ 97,701,232	\$ -	\$ 97,701,232
Money market funds	-	1,283,252	1,283,252
Total investments at fair value	<u>\$ 97,701,232</u>	<u>\$ 1,283,252</u>	<u>\$ 98,984,484</u>

DEEL PEO RETIREMENT PLAN
Notes to Financial Statements
December 31, 2025

NOTE H – EXEMPT PARTY-IN-INTEREST TRANSACTIONS

Certain Plan investments are managed by Mid Atlantic Trust Company, which is the Custodian, as defined by the Plan. These transactions are considered exempt party-in-interest transactions. Fees paid for investment management services were included as a reduction of the return earned on each respective fund. The Plan issues loans to participants, which are secured by the vested balances in the participants' accounts. Certain administrative functions of the Plan are performed by officers or employees of the Plan Sponsor, or participating employers. No such officer or employee receives compensation from the Plan.

NOTE I – TRANSFERS OF ASSETS

During 2025, assets totaling \$76,839,733 were transferred into the Plan from other defined contribution plans of companies acquired by the Plan Sponsor in 2025.

The Board of Directors of Fusion Specialty Americas Insurance Services, LLC, and Supermove, Inc., voted on October 1, 2025 and October 17, 2025, respectively, to transfer the assets of their respective plans out of the Plan effective July 1, 2025 and November 1, 2025, respectively. Plan assets, totaling \$1,463,725 were transferred out of the Plan and to other defined contribution plans.

NOTE J – PARTICIPANT CONTRIBUTIONS TRANSFERRED LATE TO THE PLAN

Certain participating employers remitted certain participant contributions totaling \$49,587, for the year ended December 31, 2025, to the Plan later than required by the DOL Regulation 2510.3-102. The Plan Sponsor corrected the investment earnings on the late deferrals to the Plan subsequent to year-end.

NOTE K – RECONCILIATION OF FORM 5500 TO FINANCIAL STATEMENTS

Following is a reconciliation of statement of net assets available for benefits and changes in net assets available for benefits per Form 5500 to the financial statements as of and for the year ended December 31, 2025:

	<u>2025</u>
Net assets available for benefits per Form 5500	\$ 101,108,845
Qualified non-elective contribution for 2025, received in 2026	19,341
Excess contributions payable	<u>(48,538)</u>
Net assets available for benefits per the financial statements	<u><u>\$ 101,079,648</u></u>
Change in net assets available for benefits per Form 5500	\$ 25,732,837
Qualified non-elective contribution for 2025, received in 2026	19,341
Excess contributions payable	<u>(48,538)</u>
Change in net assets available for benefits per the financial statements	<u><u>\$ 25,703,640</u></u>

NOTE L – SUBSEQUENT EVENTS

The Plan's management has evaluated subsequent events through July 27, 2026, the date the financial statements were available for issuance.

DEEL PEO RETIREMENT PLAN
EIN: 92-2581574 Plan Number: 001
Schedule H, Line 4i Schedule of Assets (Held at End of Year)
December 31, 2025

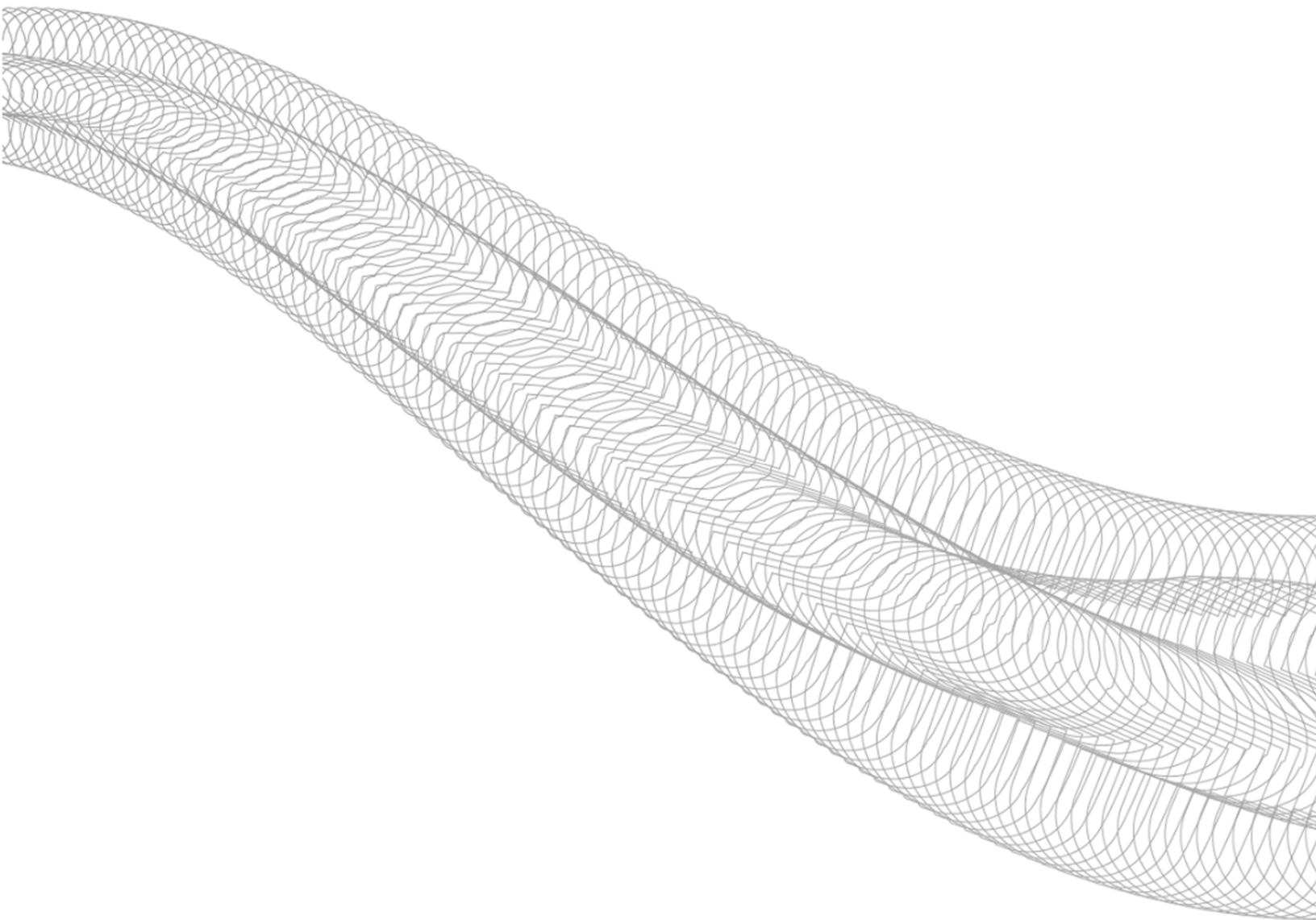
(a)	(b) Identity of issue, borrower, lessor or similarly party	(c) Description of investment including maturity date, rate of interest, collateral, par or maturity value	(d) Cost **	(e) Current Value
	MFS Blended Research Intl Eq	Mutual Fund	\$	440,418
	iShares MSCI EAFE International Index	Mutual Fund		2,136,640
	Columbia Real Estate Equity 3	Mutual Fund		48,397
	Federated Hermes MDT Mid Cap Growth	Mutual Fund		203,056
	Fidelity Mid Cap Index	Mutual Fund		806,986
	Fidelity Int'l Index	Mutual Fund		1,626,545
	Fidelity 500 Index	Mutual Fund		10,124,764
	Fidelity US Bond Index	Mutual Fund		509,629
	Allspring Real Return Fund Class	Mutual Fund		33,146
	JPMorgan Large Cap Growth Fund	Mutual Fund		1,436,013
	Putnam Emerging Markets Equity	Mutual Fund		128,721
	Putnam Large Cap Value	Mutual Fund		490,676
	PIMCO RAE US Small Fund Institutional	Mutual Fund		118,274
	Victory RS Global	Mutual Fund		90,159
	American High-Income Trust	Mutual Fund		223,712
	American Funds Multi-Sector Income	Mutual Fund		71,683
	Victory Intermediate Bond Fund	Mutual Fund		52,549
	Vanguard Intermediate-Term Bond Index Admiral	Mutual Fund		4,516,166
	Vanguard Consumer Staples Index	Mutual Fund		1,550,187
	Vanguard Emerging Markets Stock Index Admiral	Mutual Fund		440,745
	Vanguard Target Retirement 2055	Mutual Fund		12,835,368
	Vanguard Target Retirement 2050	Mutual Fund		10,685,769
	Vanguard Target Retirement 2040	Mutual Fund		4,974,067
	Vanguard Global Capital Cycles Fund Investor	Mutual Fund		459,258
	Vanguard Target Retirement 2065	Mutual Fund		3,279,100
	Vanguard Small Cap Index Admiral	Mutual Fund		607,092
	Vanguard Target Retirement 2070	Mutual Fund		604,227
	Vanguard Short-Term Inf Prot Index Admiral	Mutual Fund		3,342
	Vanguard Target Retirement 2030	Mutual Fund		2,271,341
	Vanguard Target Retirement Income	Mutual Fund		852,004
	Vanguard Target Retirement 2045	Mutual Fund		9,613,721
	Vanguard Total Stock Market Index Admiral	Mutual Fund		9,589,577
	Vanguard Target Retirement 2035	Mutual Fund		4,482,947
	Vanguard Target Retirement 2060	Mutual Fund		7,832,599
	Vanguard Target Retirement 2025	Mutual Fund		2,286,687
	Vanguard Target Retirement 2020	Mutual Fund		1,879,563
	Vanguard Utilities Index Admiral	Mutual Fund		396,104
	Vanguard Federal Money Market	Money Market Fund		1,283,252
*	Participant Loans	Interest rates from 7.25% to 10.50%		733,747
				<u>\$ 99,718,231</u>

(a) * A party-in-interest as defined by ERISA

(d) ** Cost is not required for participant directed funds

DEEL PEO RETIREMENT PLAN
EIN: 92-2581574 Plan Number: 001
Schedule H, Line 4a Schedule of Delinquent Participant Contributions
Year Ended December 31, 2025

2025 Form 5500 Line 4 a - Schedule of Delinquent Participant Contributions				
Participant Contributions Transferred Late to the Plan	Total that Constitute Prohibited Transactions			Total Fully Corrected Under VFCP and PTE 2002-51
\$49,587	Contributions Not Corrected	Contributions corrected Outside VFCP	Contributions Pending Correction in VFCP	
Check here if late Participant Loan Repayments are included: ☒	\$49,587			



Arizona

950 W. Indian School Rd
Phoenix, AZ 85013

Wisconsin

3804 W Vliet St
Milwaukee, WI 53208

New York

175 Varick St.
New York, NY 10014

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

Deel PEO Retirement Plan PLAN # 001

EIN # 92-2581574

(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	(d) Cost	(e) Current value
	MFS	BRXVX - MFS Blended Research Intl Eq R6		440,418
	BlackRock	BTMKX - iShares MSCI EAFE International Index Fund Class K		2,136,640
	Columbia	CREYX - Columbia Real Estate Equity 3		48,396
	Federated	FGSKX - Federated Hermes MDT Mid Ccap Growth R6		203,056
	Fidelity	FSMDX - Fidelity Mid Cap Index		806,986
	Fidelity	FSPSX - Fidelity Int'l Index		1,626,545
	Fidelity	FXAIX - Fidelity 500 Index Fund		10,124,764
	Fidelity	FXNAX - Fidelity US Bond Index Fund		509,629
	Allspring	IPBJX - Allspring Real Return Fund Class R6		33,146
	JPMorgan	JLGMX - JPMorgan Large Cap Growth Fund Class R6		1,436,013
	Putnam	PEMQX - Putnam Emerging Markets Equity R6		128,721
	Putnam	PEQSX - Putnam Large Cap Value R6		490,676
	PIMCO	PMJIX - PIMCO RAE US Small Fund Institutional CI		118,274
	Victory	RGGRX - Victory RS Global R6		90,159
	American Funds	RITGX - American High-Incometrust - R6 Shr CI		223,712
	American Funds	RMDUX - American Funds Multi-Sector Income R-6		71,683
	Victory	URIBX - Victory Intermediate Bond Fund R6		52,549
	Vanguard	VBILX - Vanguard Intermediate-Term Bond Index Fund Admiral Shares		4,516,166
	Vanguard	VCSAX - Vanguard Consumer Staples Index		1,550,187
	Vanguard	VEMAX - Vanguard Emerging Markets Stock Index Fund Admiral Shares		440,745
	Vanguard	VFFVX - Vanguard Target Retirement 2055 Fund Investor Shares		12,835,368
	Vanguard	VFIFX - Vanguard Target Retirement 2050 Fund Investor Shares		10,685,769
	Vanguard	VFORX - Vanguard Target Retirement 2040 Fund Investor Shares		4,974,067
	Vanguard	VGPMX - Vanguard Precious Metals		459,258
	Vanguard	VLXVX - Vanguard Target Retirement 2065 Inv		3,279,100
	Vanguard	VMFXX - Vanguard Federal Money Market Fund Investor Shares		1,283,252
	Vanguard	VSMAX - Vanguard Small-Cap Index Fund Admiral Shares		607,092
	Vanguard	VSVNX - Vanguard Target Retirement 2070		604,227
	Vanguard	VTAPX - Vanguard Short-Term Inflation-Protected Securities Index Fund Admiral Shares		3,342
	Vanguard	VTHRX - Vanguard Target Retirement 2030		2,271,341
	Vanguard	VTINX - Vanguard Target Retirement Income Fund Investor Class		852,004
	Vanguard	VTIVX - Vanguard Target Retirement 2045		9,613,721
	Vanguard	VTMAX - Vanguard Total Stock Market Index Fund Admiral Shares		9,589,577
	Vanguard	VTTHX - Vanguard Target Retirement 2035 Fund Investor Shares		4,482,947
	Vanguard	VTTSX - Vanguard Target Retirement 2060 Fund Investor Shares		7,832,599
	Vanguard	VTTVX - Vanguard Target Retirement 2025		2,286,687
	Vanguard	VTWNX - Vanguard Target Retirement 2020		1,879,563
	Vanguard	VUIAX - Vanguard Utilities Index Admiral		396,104
	Participant Loans	7.25 - 10.50 %		733,747