Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

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

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

OMB Nos. 1210-0110
1210-0089

2025

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 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
SHEFFIELD PHARMACEUTICALS, LLC RETIREMENT PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 10/01/2016

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)
SHEFFIELD PHARMACEUTICALS, LLC

170 BROAD STREET
NEW LONDON, CT 06320

2b Employer Identification Number (EIN)
06-1560000

2c Plan Sponsor's telephone number
860-442-4451

2d Business code (see instructions)
325410

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.	09/29/2026	WILLIAM FULLER
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address [X] Same as Plan Sponsor

3b Administrator's EIN

3c Administrator's telephone number

4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report:

a Sponsor's name

4b EIN

c Plan Name

4d PN

5	Total number of participants at the beginning of the plan year	**5**	170
6	Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines **6a(1), 6a(2), 6b, 6c,** and **6d**).		
a(1)	Total number of active participants at the beginning of the plan year	**6a(1)**	130
a(2)	Total number of active participants at the end of the plan year	**6a(2)**	148
b	Retired or separated participants receiving benefits	**6b**	1
c	Other retired or separated participants entitled to future benefits	**6c**	40
d	Subtotal. Add lines **6a(2)**, **6b**, and **6c**.	**6d**	189
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	0
f	Total. Add lines **6d** and **6e**.	**6f**	189
g(1)	Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item)	**6g(1)**	117
g(2)	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g(2)**	107
h	Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.	**6h**	0
7	Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

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

2E 2F 2G 2J 2K 2S 2T 3B 3D 2R 3H

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)** [X] 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)** [X] Trust
- **(4)** [ ] General assets of the sponsor

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

a Pension Schedules

- **(1)** [X] **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)** [X] **H** (Financial Information)
- **(2)** [ ] **I** (Financial Information – Small Plan)
- **(3)** [ ] **A** (Insurance Information) – Number Attached 0
- **(4)** [X] **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)	Service Provider Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ **File as an attachment to Form 5500.**	**2025** **This Form is Open to Public Inspection.**

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

A Name of plan
SHEFFIELD PHARMACEUTICALS, LLC RETIREMENT PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
SHEFFIELD PHARMACEUTICALS, LLC

D Employer Identification Number (EIN)
06-1560000

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

a Check "Yes" or "No" to indicate whether you are excluding a person from the remainder of this Part because they received only eligible indirect compensation for which the plan received the required disclosures (see instructions for definitions and conditions).. . . . . [X] Yes [ ] No

b If you answered line 1a "Yes," enter the name and EIN or address of each person providing the required disclosures for the service providers who received only eligible indirect compensation. Complete as many entries as needed (see instructions).

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

FIDELITY INVESTMENTS INSTITUTIONAL

04-2647786

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

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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)

FIDELITY INVESTMENTS INSTITUTIONAL

04-2647786

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
37 64 65	RECORDKEEPER	21033	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [X] No [ ]

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

ROCKLAND TRUST CO

04-1782600

(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?
27	ADVISOR	9996	Yes [ ] No [X]	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

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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
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Financial Information

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

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

OMB No. 1210-0110

2025

This Form is Open to Public Inspection

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

A Name of plan
SHEFFIELD PHARMACEUTICALS, LLC RETIREMENT PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
SHEFFIELD PHARMACEUTICALS, LLC

D Employer Identification Number (EIN)
06-1560000

Part I Asset and Liability Statement

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

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a	0	0
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	0	14570
(2) Participant contributions	1b(2)	0	10085
(3) Other	1b(3)	0	0
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	255577	542920
(2) U.S. Government securities	1c(2)	0	0
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)	0	0
(B) All other	1c(3)(B)	0	0
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)	0	0
(B) Common	1c(4)(B)	321991	260067
(5) Partnership/joint venture interests	1c(5)	0	0
(6) Real estate (other than employer real property)	1c(6)	0	0
(7) Loans (other than to participants)	1c(7)	0	0
(8) Participant loans	1c(8)	242458	141365
(9) Value of interest in common/collective trusts	1c(9)	0	0
(10) Value of interest in pooled separate accounts	1c(10)	0	0
(11) Value of interest in master trust investment accounts	1c(11)	0	0
(12) Value of interest in 103-12 investment entities	1c(12)	0	0
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	6647126	8032788
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)	0	0
(15) Other	1c(15)	0	0

		(a) Beginning of Year	(b) End of Year
1d Employer-related investments:			
(1) Employer securities	1d(1)	0	0
(2) Employer real property	1d(2)	0	0
1e Buildings and other property used in plan operation	1e	0	0
1f Total assets (add all amounts in lines 1a through 1e)	1f	7467152	9001795
Liabilities			
1g Benefit claims payable	1g	0	0
1h Operating payables	1h	0	0
1i Acquisition indebtedness	1i	0	0
1j Other liabilities	1j	0	0
1k Total liabilities (add all amounts in lines 1g through1j)	1k	0	0
Net Assets			
1l Net assets (subtract line 1k from line 1f)	1l	7467152	9001795

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)	241575	
(B) Participants	2a(1)(B)	555398	
(C) Others (including rollovers)	2a(1)(C)	0	
(2) Noncash contributions	2a(2)	0	
(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		796973
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	16130	
(B) U.S. Government securities	2b(1)(B)	0	
(C) Corporate debt instruments	2b(1)(C)	0	
(D) Loans (other than to participants)	2b(1)(D)	0	
(E) Participant loans	2b(1)(E)	15912	
(F) Other	2b(1)(F)	0	
(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		32042
(2) Dividends: **(A)** Preferred stock	2b(2)(A)	0	
(B) Common stock	2b(2)(B)	7031	
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	295929	
(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		302960
(3) Rents	2b(3)		0
(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)	616152	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	570043	
(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		46109
(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)	0	
(B) Other	2b(5)(B)	43523	
(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		43523

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		0
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		0
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		0
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		0
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		876953
c Other income	2c		0
d Total income. Add all **income** amounts in column (b) and enter total	2d		2098560
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	515426	
(2) To insurance carriers for the provision of benefits	2e(2)	0	
(3) Other	2e(3)	0	
(4) Total benefit payments. Add lines **2e(1)** through **(3)**	2e(4)		515426
f Corrective distributions (see instructions)	2f		0
g Certain deemed distributions of participant loans (see instructions)	2g		15359
h Interest expense	2h		0
i Administrative expenses:			
(1) Salaries and allowances	2i(1)	0	
(2) Contract administrator fees	2i(2)	0	
(3) Recordkeeping fees	2i(3)	21033	
(4) IQPA audit fees	2i(4)	0	
(5) Investment advisory and investment management fees	2i(5)	12099	
(6) Bank or trust company trustee/custodial fees	2i(6)	0	
(7) Actuarial fees	2i(7)	0	
(8) Legal fees	2i(8)	0	
(9) Valuation/appraisal fees	2i(9)	0	
(10) Other trustee fees and expenses	2i(10)	0	
(11) Other expenses	2i(11)	0	
(12) Total administrative expenses. Add lines **2i(1)** through **(11)**	2i(12)		33132
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		563917
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		1534643
l Transfers of assets:			
(1) To this plan	2l(1)		0
(2) From this plan	2l(2)		0

Part III Accountant's Opinion

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

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

(1) [X] Unmodified **(2)** [ ] Qualified **(3)** [ ] Disclaimer **(4)** [ ] Adverse

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

(1) [X] DOL Regulation 2520.103-8 **(2)** [ ] DOL Regulation 2520.103-12(d) **(3)** [ ] neither DOL Regulation 2520.103-8 nor DOL Regulation 2520.103-12(d).

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

(1) Name: KLR LTD. **(2)** EIN: 05-0409384

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

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

Part IV Compliance Questions

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

During the plan year:

		Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)	**4a**	X		10085
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)	**4b**		X	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	**4c**		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)	**4d**		X	
e Was this plan covered by a fidelity bond?	**4e**	X		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?	**4f**		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	**4g**		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	**4h**		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	**4i**	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)	**4j**		X	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	**4k**		X	
l Has the plan failed to provide any benefit when due under the plan?	**4l**		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	**4m**		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	**4n**		X	

5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year? [ ] Yes [X] No

If "Yes," enter the amount of any plan assets that reverted to the employer this year _____.

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

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

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

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

SCHEDULE R (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Retirement Plan Information

This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code).

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

OMB No. 1210-0110

2025

This Form is Open to Public Inspection.

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

A Name of plan
SHEFFIELD PHARMACEUTICALS, LLC RETIREMENT PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
SHEFFIELD PHARMACEUTICALS, LLC

D Employer Identification Number (EIN)
06-1560000

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): 04-6568107

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

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

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

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

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

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

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

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

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

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

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

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

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

Part III Amendments

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

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

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

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

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

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

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

☐ Yes.

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

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

☐ No. Other. Provide explanation._____

Part VII IRS Compliance Questions

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

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

☒ Design-based safe harbor method

☐ "Prior year" ADP test

☒ "Current year" ADP test

☐ N/A

22 If the plan sponsor is an adopter of a pre-approved plan that received a favorable IRS Opinion Letter, enter the date of the Opinion Letter 06 / 30 / 2020 (MM/DD/YYYY) and the Opinion Letter serial number Q702438A .

SHEFFIELD PHARMACEUTICALS, LLC
RETIREMENT PLAN

Financial Statements
and Supplemental Schedules

December 31, 2025 and 2024

(With Independent Auditors' Report Thereon)

KLR Ltd.
Andover • Boston • Newport • Providence

951 North Main Street
Providence, Rhode Island 02904
401-274-2001 • klrltd.com

KLR

Certified Public Accountants
and Business Consultants

SHEFFIELD PHARMACEUTICALS, LLC
RETIREMENT PLAN

FINANCIAL STATEMENTS
AND SUPPLEMENTAL SCHEDULES

December 31, 2025 and 2024

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FINANCIAL STATEMENTS:	
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Note A: Schedules not included with this supplemental data have been omitted because they are not applicable.

KLR Ltd.
Andover • Boston • Newport • Providence

951 North Main Street
Providence, Rhode Island 02904
401-274-2001 • klrltd.com

KLR

Certified Public Accountants
and Business Consultants

INDEPENDENT AUDITORS' REPORT

To the Plan Administrator of the
Sheffield Pharmaceuticals, LLC Retirement Plan:

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

We have performed audits of the accompanying financial statements of the Sheffield Pharmaceuticals, LLC Retirement Plan (the 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 Statements of Net Assets Available for Plan Benefits as of December 31, 2025 and 2024, and the related Statement of Changes in Net Assets Available for Plan 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 the 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 2024, and for the year ended December 31, 2025, stating that the certified investment information, as described in Note 6 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 Auditors' Responsibilities for the Audit of the Financial Statements section:

- the amounts and disclosures in the financial statements referred to above, other than those agreed to or derived from the certified investment information, are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America.

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

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America (GAAS). Our responsibilities under those standards are further described in the Auditors' Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of the Plan and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our 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 the 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.

Auditors' 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 auditors' report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with 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 the Plan's internal control. Accordingly, no such opinion is expressed.

- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.

- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan's ability to continue as a going concern for a reasonable period of time.

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

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

In our opinion:

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

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

KLR Ltd.

September 28, 2026

SHEFFIELD PHARMACEUTICALS, LLC RETIREMENT PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR PLAN BENEFITS
December 31, 2025 and 2024

	2025	2024
Assets		
Investments, at fair value:		
Money market fund	$ 180,561	$ 66,866
Mutual funds	7,943,876	6,564,814
Self-directed brokerage account	711,338	593,014
	8,835,775	7,224,694
Receivables:		
Participant contributions	10,085	-
Employer contributions	14,570	-
Participant notes receivable	141,365	242,458
	166,020	242,458
Net Assets Available for Plan Benefits	**$ 9,001,795**	**$ 7,467,152**

See accompanying notes to the financial statements and independent auditors' report.

SHEFFIELD PHARMACEUTICALS, LLC RETIREMENT PLAN
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR PLAN BENEFITS
Year Ended December 31, 2025

Additions to net assets attributed to:		
Investment income:		
Net appreciation in fair value of investments	$	987,529
Interest and dividends		298,150
		1,285,679
Interest income from participant notes receivable		17,279
Contributions:		
Participant		555,398
Employer		241,575
		796,973
Total additions		**2,099,931**
Deductions from net assets attributed to:		
Benefits paid to participants		532,152
Administrative expenses		33,136
Total deductions		**565,288**
Net increase		**1,534,643**
Net Assets Available for Plan Benefits:		
Beginning of year		**7,467,152**
End of year	**$**	**9,001,795**

See accompanying notes to the financial statements and independent auditors' report.

1. Description of the Plan

The following description of the Sheffield Pharmaceuticals, LLC Retirement Plan (the Plan) is intended to provide only general information regarding the Plan. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

General

The Plan is a defined contribution plan covering all employees of Sheffield Pharmaceuticals, LLC (Employer). Employees who are at least 18 years of age and have completed three months of service are eligible to participate in the Plan. Entry dates occur on the first day of the calendar quarter coinciding with or following the satisfaction of the eligibility requirements. The Plan was established under Sections 401(a) and 401(k) of the Internal Revenue Code (IRC) and is subject to the provisions of ERISA. All investments are participant directed.

The Employer is also the administrator of the Plan. As administrator, the Employer has exclusive authority and responsibility for all matters in connection with the operation and administration of the Plan. Fidelity Management Trust Company (Fidelity) is the appointed trustee of the Plan, and acts at the direction of the Plan Administrator.

Contributions

Eligible employees may elect to contribute up to 90% of their annual compensation, not to exceed annual limitations as prescribed by the Internal Revenue Code (IRC), on a pre-tax or after-tax basis. Employees who have reached the age of 50 by the end of the calendar year may also make a catch-up contribution. Employees may also contribute amounts representing distributions from other qualified defined benefit or contribution plans if the contributions satisfy the tax law requirements for a qualified rollover (Rollover). Participants may change or revoke their deferral election on the first day of each month.

Effective January 1, 2025, the Plan adopted a provision of the Setting Every Community Up for Retirement Enhancement Act of 2022 (SECURE Act 2.0), permitting certain eligible participants to make increased catch-up elective deferrals, referred to as "super catch-up" contributions. Under this provision, the maximum catch-up deferral amount for participants between the ages of 60 and 63 increased from $7,500 to $11,250, indexed for inflation after 2025.

The Employer makes a safe harbor matching contribution equal to 100% of the first 3% of eligible compensation that a participant contributes to the Plan, and 50% of the next 2% of eligible compensation contributed. Employer safe-harbor matching contributions are made weekly. For the year ended December 31, 2025, the Employer made safe-harbor matching contributions in the amount of approximately $241,600.

The Employer may make discretionary matching or non-elective contributions. Employer discretionary non-elective contributions, if made, are allocated to participants in the ratio that their eligible compensation bears to the total eligible compensation paid to all eligible participants for the Plan year. To be eligible for the Employer discretionary non-elective contribution, a participant must be employed by the Employer on the last day of the Plan year in which it was made. The Employer did not make any discretionary matching or non-elective contributions for the year ended December 31, 2025.

Participant Accounts

Each participant's account is credited with the participant's contribution and their allocation of the Employer's contributions and earnings/losses and any expenses incurred. 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, discretionary non-elective Employer and safe harbor matching contributions, plus the allocation of Plan earnings on those contributions at the time of allocation. Participants become vested in discretionary Employer matching contributions and the allocated earnings on those contributions as follows: 25% after 1 year, 50% after 2 years, 75% after 3 years, and 100% after 4 years. Participants are immediately vested in all accounts upon death, disability, or attainment of retirement age as defined in the Plan document. A year of vesting service is equal to the Plan year.

Participant Notes Receivable

Participants may borrow from their account a minimum of $1,000 up to a maximum equal to the lesser of $50,000 or 50% of their vested account balance. A participant can only have one loan outstanding at any time. Terms range from 1 to 5 years, or up to 10 years for the purchase of a primary residence. The notes are secured by the vested balance in the participant's account and bear interest at a rate determined reasonable by the Plan Administrator as defined in the Plan document. The interest rate is fixed for the term of the loan. Principal and interest is paid ratably through payroll deductions.

Payment of Benefits

The Plan allows for in-service distributions of the participant's vested account balance upon reaching age 59 ½. Distributions are also permitted upon retirement, death, disability or termination of service, as defined by the Plan. A participant (or participant's beneficiary in the event of death) will be entitled to 100% of their vested account balance, payable in a lump-sum distribution. In-service withdrawals are also permitted for Rollover account balances at any time. If a participant's vested balance is equal to or less than $1,000, the participant will receive an immediate cash-out of their vested account balance, and the non-vested portion shall be treated as a forfeiture. If a participant's vested balance exceeds $1,000 and is equal to or less than $7,000, the amount will be rolled over to an individual retirement account designated by the trustee, unless otherwise directed by the participant.

If the participant's vested balance holds assets in the self-directed brokerage option of the Plan, such participant's account will not be automatically distributed, and the Employer must direct the trustee to liquidate the assets and separately process a distribution.

Effective July 1, 2025, the Plan adopted provisions of the SECURE Act 2.0 permitting withdrawals for emergency expenses, federally declared disasters, and certain distributions related to domestic abuse. The Plan also adopted a provision of the SECURE Act 1.0, which provides participants with distributions up to $5,000 during the one-year period beginning on the date on which the participant's child is born or on which the legal adoption by the participant of an eligible adoptee is finalized.

Hardship Withdrawals
Participants may request a financial hardship withdrawal from their accounts, subject to the limitations imposed by the IRC. The minimum permitted hardship withdrawal is $500. Effective January 5, 2025, the Plan adopted the provision of the SECURE Act 2.0 to permit self-certification of financial hardship withdrawals.

Forfeitures
Participants who terminate employment before completing four years of service forfeit the non-vested portion of the discretionary matching contributions to their accounts. Forfeitures may first be used to pay administrative expenses and remaining amounts will be used to fund any future Employer contributions payable under the Plan. Forfeited non-vested account balances at December 31, 2025 and 2024 were $309 and $33, respectively. During 2025, no forfeitures were used to pay Plan expenses.

2. Summary of Significant Accounting Policies

Basis of Accounting
The financial statements of the Plan have been prepared on the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America.

Valuation of Investments 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 (Note 3).

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

Participant Notes Receivable
Participant notes receivable are measured at their unpaid principal balances and are secured by the balance in the respective participants' account. Interest income on participant notes receivable is recorded when it is earned. Related fees are recorded as administrative expenses and are expensed when incurred. A receivable is considered past due if payment has not been received within the stated terms. Delinquent participant notes receivable are reclassified as distributions based on terms of the Plan document.

Contributions
Participant and safe harbor matching contributions are recorded weekly when the Employer remits the contributions for investment into the Plan. Employer discretionary contributions, if applicable, are made at the end of the Plan year.

Administrative Expenses
Expenses incurred in the administration of the Plan are paid by the Employer unless the Employer directs that such expenses shall be paid by the Plan. Expenses that are paid by the Employer are excluded from these financial statements. Investment management and recordkeeping fees, if applicable, are paid by the Plan through revenue sharing as a reduction of investment income (net appreciation or depreciation) from the related investment fund. Participant notes receivable set-up and administration fees are charged directly against a participant's account on a pro-rata basis from all of the funds in which the respective participant is invested at the time the fees are taken and are included in administrative expenses.

Payment of Benefits
Benefits are recognized when paid to participants or their designated beneficiaries.

Estimates
The preparation of financial statements in accordance with accounting principles generally accepted in the United States of America requires the Plan Administrator to make estimates and assumptions that affect certain reported amounts of assets and disclosures of contingent assets and liabilities at the date of the financial statements and the reported changes in net assets. Accordingly, actual results may differ from those estimates.

Risks and Uncertainties
The Plan provides for various investment options with a variety of investment objectives. Investment securities are exposed to various risks such as interest rate risk, market risk and credit risk. Market risks include global events which could impact the value of investment securities, such as a pandemic or international conflict. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect participants' account balances and the amounts reported in the Statements of Net Assets Available for Plan Benefits.

The Plan invested in two and three mutual funds that accounted for approximately 27% and 36% of total Plan investments as of December 31, 2025 and 2024, respectively.

Financial Instruments with a Concentration of Credit Risk
The Plan's investments are held by a single trustee. The Plan's exposure to credit risk is associated with the outside entity's non-performance of their fiduciary responsibilities relating to these amounts as specified in the agreements. Benefits provided by the Plan are not insured or guaranteed by the Pension Benefit Guaranty Corporation.

3. Fair Value Measurements

The framework for measuring fair value provides a hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives highest priority to unadjusted quoted prices in active markets for identical assets (level 1) and the lowest priority to unobservable inputs (level 3). The three levels of the fair value hierarchy and inputs to the valuation methodologies are described as follows:

Level 1 inputs are unadjusted quoted prices in active markets for identical assets the Plan has the ability to access.

Level 2 inputs are other than quoted prices in active markets that are observable either directly or indirectly for the asset. Such inputs are derived principally from or corroborated by observable market data for similar assets by correlation or other means, over substantially the full contractual term of the asset, if applicable.

Level 3 inputs are unobservable and significant to the fair value measurement. Such inputs generally rely on the Plan's own assumptions about the assumptions that market participants would use in pricing the asset.

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

The following is a description of the valuation methodologies used for assets measured at fair value on a recurring basis.

Money Market Fund: The carrying amount of the money market fund is deemed to be valued at the deposit amount plus accrued interest, as determined according to stated terms.

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.

Self-directed Brokerage Account: Valued at the closing price reported on the active market on which the individual securities are traded. This account consists of common stock and money market funds.

As of December 31, 2025 and 2024, the Plan's investments are reported at level 1 within the fair value hierarchy.

4. Plan Termination

The Employer expects to continue the Plan indefinitely. However, the Employer reserves the right to amend the Plan or contributions thereto, at any time and in any manner that it deems advisable, provided that no amendment shall have the effect of diverting Plan assets for purposes other than for the exclusive benefit of the Plan participants and any Plan termination would be subject to the provisions of ERISA. In the event of Plan termination, the participants would become fully vested and entitled to receive all amounts credited to their accounts.

5. Income Tax Status

The Plan adopted a volume submitter plan document created by Fidelity who received an opinion letter dated June 30, 2020, in which the Internal Revenue Service (IRS) stated that the Plan document, as then designed, was in compliance with the applicable requirements of the IRC. Although the Plan has been amended since receiving the opinion letter, the Plan Administrator and the Plan's tax counsel believe that the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC.

GAAP requires Plan management to evaluate tax positions taken by the Plan and recognize a tax liability for any uncertain position that more likely than not would not be sustained upon examination by the IRS. 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 tax periods in progress.

6. Summary of Information Certified by the Trustee

The following is a summary of financial information and data certified by the trustee, Fidelity:

Statements of Net Assets Available for Plan Benefits at December 31, 2025 and 2024, except for contributions receivable;

Investment income and interest income from participant notes receivable on the Statement of Changes in Net Assets Available for Plan Benefits for the year ended December 31, 2025; and

Investment information provided in the supplemental schedule, Schedules of Assets (Held at End of Year) at December 31, 2025.

7. Related Party and Party-in-Interest Transactions

Plan investments are held and managed by Fidelity, the trustee of the Plan. Therefore, these transactions qualify as party-in-interest transactions. The Plan made direct payments to Fidelity for administrative services of approximately $21,000 for the year ended December 31, 2025. The Plan also made direct payments to its investment advisor of approximately $10,000 during 2025. Such costs are allocated to participants in the Plan. Participant notes receivable also qualify as party-in-interest transactions.

8. Differences from Form 5500

Differences between the Annual Return/Report of Employee Benefit Plan, Form 5500, and these financial statements are a result of different classifications between line items. Total Plan assets are in agreement.

9. Non-exempt Transactions

During 2025, the Employer failed to remit participant contributions of $10,085 to the Plan on a timely basis as prescribed in the applicable Department of Labor Regulations 29 CFR 2510.3-102. Defined contribution plans must remit employee contributions to the Plan as soon as they can be reasonably segregated from the Plan Administrator's general assets, but no later than the 15th business day of the month following the month in which the participant contributions are withheld or received by the Employer. The Employer remitted participant contributions due to the Plan during 2026. Lost earnings will be remitted in 2026.

10. Subsequent Events

Effective January 1, 2026, the Plan adopted a provision of SECURE Act 2.0, requiring catch-up contributions made by participants age 50 or older whose prior year wages from the Plan sponsor exceed the applicable statutory threshold to be treated as Roth contributions.

Effective June 15, 2026, the Employer formally adopted an amendment to the Plan to incorporate applicable provisions of the SECURE Act.

Management has evaluated subsequent events through September 28, 2026, which is the date these financial statements were available to be issued.

SHEFFIELD PHARMACEUTICALS, LLC RETIREMENT PLAN
ATTACHMENT TO SCHEDULE H, PART 4, LINE 4a-
SCHEDULE OF DELINQUENT PARTICIPANT CONTRIBUTIONS
Year Ended December 31, 2025

Employer Identification Number: 06-1560000
Plan Number: 001

Identity of Party Involved		Relationship to Plan, Employer or Other Party-in-interest
Sheffield Pharmaceuticals, LLC	*	Employer

	Total that Constitutes Non-exempt Prohibited Transactions				
	Participant Contributions Transferred Late to Plan	Contributions Not Corrected	Contributions Corrected Outside VFCP	Contributions Pending Correction in VFCP	Total Fully Corrected Under VFCP and PTE-2002-51
(1)	$ 10,085	$ 10,085	$ -	$ -	$ -

(1) 2025 delinquent participant contributions, due to failed timely remittance as prescribed in the applicable Department of Labor Regulation 29 CFR 2510.3-102, as reported on the December 31, 2025 financial statements. Principal was transmitted during the year ended December 31, 2026. Lost earnings will be remitted in 2026.

* Indicates party-in-interest to the Plan.

SHEFFIELD PHARMACEUTICALS, LLC RETIREMENT PLAN
ATTACHMENT TO SCHEDULE H, PART 4, ITEM 4i
SCHEDULE OF ASSETS (HELD AT END OF YEAR)
December 31, 2025

Schedule 2

KLR

Employer Identification Number: 06-1560000
Plan Number: 001

(a)	(b) Identity of issue, borrower, lessor or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value	(e) Current value
	Money Market Fund:		
*	Fidelity	Government Money Market Fund	$ 180,561
	Mutual Funds:		
*	Fidelity	Total Market Index Fund	1,483,562
*	Fidelity	Freedom Index 2035 Fund - Institutional Premium Class	941,556
	JPMorgan	Large Cap Growth Fund - Class R6	829,445
*	Fidelity	Freedom Index 2030 Fund - Institutional Premium Class	594,618
*	Fidelity	Freedom Index 2050 Fund - Institutional Premium Class	593,456
*	Fidelity	Freedom Index 2045 Fund - Institutional Premium Class	592,221
*	Fidelity	Freedom Index 2025 Fund - Institutional Premium Class	456,993
*	Fidelity	Freedom Index 2020 Fund - Institutional Premium Class	405,398
*	Fidelity	Freedom Index 2055 Fund - Institutional Premium Class	344,372
*	Fidelity	Freedom Index 2060 Fund - Institutional Premium Class	331,156
*	Fidelity	International Index Fund	311,660
*	Fidelity	U.S. Bond Index Fund	190,289
	American Funds	EuroPacific Growth Fund Class R-6	152,612
*	Fidelity	Freedom Index 2040 Fund - Institutional Premium Class	144,393
*	Fidelity	Growth Strategies Fund - Class K	125,331
*	Fidelity	Capital & Income Fund	87,115
*	Fidelity	Total Bond Fund	71,246
*	Fidelity	Extended Market Index Fund	67,041
	Vanguard	Explorer Fund Admiral Shares	60,212
*	Fidelity	Balanced Fund - Class K	53,616
*	Fidelity	Equity-Income Fund - Class K	49,844
	DFA	U.S. Targeted Value Portfolio Institutional Class	40,461
*	Fidelity	Freedom Index 2010 Fund - Institutional Premium Class	10,656
	BlackRock	Commodity Strategies Portfolio Class K	2,860
	DWS	Real Estate Securities Fund - Class R6	2,004
*	Fidelity	Small Cap Index Fund	1,631
*	Fidelity	Freedom Index Income Fund - Institutional Premium Class	111
*	Fidelity	Freedom Index 2065 Fund Investor Class	17
	Total Mutual Funds		7,943,876
	Self-Directed Brokerage Account		
*	Fidelity	Brokerage Link Fund	711,338
*	Participant Loans	Interest rates ranging from 4.25% to 9.5%, maturing at various dates through August 2030, collateralized by participant account balances	141,365
	Total Investments		$ 8,977,140

* Indicates party-in-interest to the Plan.

Note: All investments are participant directed; therefore, the unit and cost columns have been omitted.

SHEFFIELD PHARMACEUTICALS, LLC
RETIREMENT PLAN

Financial Statements
and Supplemental Schedules

December 31, 2025 and 2024

(With Independent Auditors' Report Thereon)

KLR Ltd.
Andover • Boston • Newport • Providence

951 North Main Street
Providence, Rhode Island 02904
401-274-2001 • klrltd.com

KLR

Certified Public Accountants
and Business Consultants

SHEFFIELD PHARMACEUTICALS, LLC
RETIREMENT PLAN

FINANCIAL STATEMENTS
AND SUPPLEMENTAL SCHEDULES

December 31, 2025 and 2024

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Note A: Schedules not included with this supplemental data have been omitted because they are not applicable.

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Certified Public Accountants
and Business Consultants

INDEPENDENT AUDITORS' REPORT

To the Plan Administrator of the
Sheffield Pharmaceuticals, LLC Retirement Plan:

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

We have performed audits of the accompanying financial statements of the Sheffield Pharmaceuticals, LLC Retirement Plan (the 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 Statements of Net Assets Available for Plan Benefits as of December 31, 2025 and 2024, and the related Statement of Changes in Net Assets Available for Plan 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 the 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 2024, and for the year ended December 31, 2025, stating that the certified investment information, as described in Note 6 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 Auditors' Responsibilities for the Audit of the Financial Statements section:

- the amounts and disclosures in the financial statements referred to above, other than those agreed to or derived from the certified investment information, are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America.

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

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America (GAAS). Our responsibilities under those standards are further described in the Auditors' Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of the Plan and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our 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 the 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.

Auditors' 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 auditors' report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with 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 the Plan's internal control. Accordingly, no such opinion is expressed.

- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.

- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan's ability to continue as a going concern for a reasonable period of time.

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

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

In our opinion:

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

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

KLR Ltd.

September 28, 2026

SHEFFIELD PHARMACEUTICALS, LLC RETIREMENT PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR PLAN BENEFITS
December 31, 2025 and 2024

	2025	2024
Assets		
Investments, at fair value:		
Money market fund	$ 180,561	$ 66,866
Mutual funds	7,943,876	6,564,814
Self-directed brokerage account	711,338	593,014
	8,835,775	7,224,694
Receivables:		
Participant contributions	10,085	-
Employer contributions	14,570	-
Participant notes receivable	141,365	242,458
	166,020	242,458
Net Assets Available for Plan Benefits	**$ 9,001,795**	**$ 7,467,152**

See accompanying notes to the financial statements and independent auditors' report.

SHEFFIELD PHARMACEUTICALS, LLC RETIREMENT PLAN
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR PLAN BENEFITS
Year Ended December 31, 2025

Additions to net assets attributed to:		
Investment income:		
Net appreciation in fair value of investments	$	987,529
Interest and dividends		298,150
		1,285,679
Interest income from participant notes receivable		17,279
Contributions:		
Participant		555,398
Employer		241,575
		796,973
Total additions		**2,099,931**
Deductions from net assets attributed to:		
Benefits paid to participants		532,152
Administrative expenses		33,136
Total deductions		**565,288**
Net increase		**1,534,643**
Net Assets Available for Plan Benefits:		
Beginning of year		**7,467,152**
End of year	**$**	**9,001,795**

See accompanying notes to the financial statements and independent auditors' report.

1. Description of the Plan

The following description of the Sheffield Pharmaceuticals, LLC Retirement Plan (the Plan) is intended to provide only general information regarding the Plan. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

General

The Plan is a defined contribution plan covering all employees of Sheffield Pharmaceuticals, LLC (Employer). Employees who are at least 18 years of age and have completed three months of service are eligible to participate in the Plan. Entry dates occur on the first day of the calendar quarter coinciding with or following the satisfaction of the eligibility requirements. The Plan was established under Sections 401(a) and 401(k) of the Internal Revenue Code (IRC) and is subject to the provisions of ERISA. All investments are participant directed.

The Employer is also the administrator of the Plan. As administrator, the Employer has exclusive authority and responsibility for all matters in connection with the operation and administration of the Plan. Fidelity Management Trust Company (Fidelity) is the appointed trustee of the Plan, and acts at the direction of the Plan Administrator.

Contributions

Eligible employees may elect to contribute up to 90% of their annual compensation, not to exceed annual limitations as prescribed by the Internal Revenue Code (IRC), on a pre-tax or after-tax basis. Employees who have reached the age of 50 by the end of the calendar year may also make a catch-up contribution. Employees may also contribute amounts representing distributions from other qualified defined benefit or contribution plans if the contributions satisfy the tax law requirements for a qualified rollover (Rollover). Participants may change or revoke their deferral election on the first day of each month.

Effective January 1, 2025, the Plan adopted a provision of the Setting Every Community Up for Retirement Enhancement Act of 2022 (SECURE Act 2.0), permitting certain eligible participants to make increased catch-up elective deferrals, referred to as "super catch-up" contributions. Under this provision, the maximum catch-up deferral amount for participants between the ages of 60 and 63 increased from $7,500 to $11,250, indexed for inflation after 2025.

The Employer makes a safe harbor matching contribution equal to 100% of the first 3% of eligible compensation that a participant contributes to the Plan, and 50% of the next 2% of eligible compensation contributed. Employer safe-harbor matching contributions are made weekly. For the year ended December 31, 2025, the Employer made safe-harbor matching contributions in the amount of approximately $241,600.

The Employer may make discretionary matching or non-elective contributions. Employer discretionary non-elective contributions, if made, are allocated to participants in the ratio that their eligible compensation bears to the total eligible compensation paid to all eligible participants for the Plan year. To be eligible for the Employer discretionary non-elective contribution, a participant must be employed by the Employer on the last day of the Plan year in which it was made. The Employer did not make any discretionary matching or non-elective contributions for the year ended December 31, 2025.

Participant Accounts

Each participant's account is credited with the participant's contribution and their allocation of the Employer's contributions and earnings/losses and any expenses incurred. 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, discretionary non-elective Employer and safe harbor matching contributions, plus the allocation of Plan earnings on those contributions at the time of allocation. Participants become vested in discretionary Employer matching contributions and the allocated earnings on those contributions as follows: 25% after 1 year, 50% after 2 years, 75% after 3 years, and 100% after 4 years. Participants are immediately vested in all accounts upon death, disability, or attainment of retirement age as defined in the Plan document. A year of vesting service is equal to the Plan year.

Participant Notes Receivable

Participants may borrow from their account a minimum of $1,000 up to a maximum equal to the lesser of $50,000 or 50% of their vested account balance. A participant can only have one loan outstanding at any time. Terms range from 1 to 5 years, or up to 10 years for the purchase of a primary residence. The notes are secured by the vested balance in the participant's account and bear interest at a rate determined reasonable by the Plan Administrator as defined in the Plan document. The interest rate is fixed for the term of the loan. Principal and interest is paid ratably through payroll deductions.

Payment of Benefits

The Plan allows for in-service distributions of the participant's vested account balance upon reaching age 59 ½. Distributions are also permitted upon retirement, death, disability or termination of service, as defined by the Plan. A participant (or participant's beneficiary in the event of death) will be entitled to 100% of their vested account balance, payable in a lump-sum distribution. In-service withdrawals are also permitted for Rollover account balances at any time. If a participant's vested balance is equal to or less than $1,000, the participant will receive an immediate cash-out of their vested account balance, and the non-vested portion shall be treated as a forfeiture. If a participant's vested balance exceeds $1,000 and is equal to or less than $7,000, the amount will be rolled over to an individual retirement account designated by the trustee, unless otherwise directed by the participant.

If the participant's vested balance holds assets in the self-directed brokerage option of the Plan, such participant's account will not be automatically distributed, and the Employer must direct the trustee to liquidate the assets and separately process a distribution.

Effective July 1, 2025, the Plan adopted provisions of the SECURE Act 2.0 permitting withdrawals for emergency expenses, federally declared disasters, and certain distributions related to domestic abuse. The Plan also adopted a provision of the SECURE Act 1.0, which provides participants with distributions up to $5,000 during the one-year period beginning on the date on which the participant's child is born or on which the legal adoption by the participant of an eligible adoptee is finalized.

Hardship Withdrawals
Participants may request a financial hardship withdrawal from their accounts, subject to the limitations imposed by the IRC. The minimum permitted hardship withdrawal is $500. Effective January 5, 2025, the Plan adopted the provision of the SECURE Act 2.0 to permit self-certification of financial hardship withdrawals.

Forfeitures
Participants who terminate employment before completing four years of service forfeit the non-vested portion of the discretionary matching contributions to their accounts. Forfeitures may first be used to pay administrative expenses and remaining amounts will be used to fund any future Employer contributions payable under the Plan. Forfeited non-vested account balances at December 31, 2025 and 2024 were $309 and $33, respectively. During 2025, no forfeitures were used to pay Plan expenses.

2. Summary of Significant Accounting Policies

Basis of Accounting
The financial statements of the Plan have been prepared on the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America.

Valuation of Investments 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 (Note 3).

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

Participant Notes Receivable
Participant notes receivable are measured at their unpaid principal balances and are secured by the balance in the respective participants' account. Interest income on participant notes receivable is recorded when it is earned. Related fees are recorded as administrative expenses and are expensed when incurred. A receivable is considered past due if payment has not been received within the stated terms. Delinquent participant notes receivable are reclassified as distributions based on terms of the Plan document.

Contributions
Participant and safe harbor matching contributions are recorded weekly when the Employer remits the contributions for investment into the Plan. Employer discretionary contributions, if applicable, are made at the end of the Plan year.

Administrative Expenses
Expenses incurred in the administration of the Plan are paid by the Employer unless the Employer directs that such expenses shall be paid by the Plan. Expenses that are paid by the Employer are excluded from these financial statements. Investment management and recordkeeping fees, if applicable, are paid by the Plan through revenue sharing as a reduction of investment income (net appreciation or depreciation) from the related investment fund. Participant notes receivable set-up and administration fees are charged directly against a participant's account on a pro-rata basis from all of the funds in which the respective participant is invested at the time the fees are taken and are included in administrative expenses.

Payment of Benefits
Benefits are recognized when paid to participants or their designated beneficiaries.

Estimates
The preparation of financial statements in accordance with accounting principles generally accepted in the United States of America requires the Plan Administrator to make estimates and assumptions that affect certain reported amounts of assets and disclosures of contingent assets and liabilities at the date of the financial statements and the reported changes in net assets. Accordingly, actual results may differ from those estimates.

Risks and Uncertainties
The Plan provides for various investment options with a variety of investment objectives. Investment securities are exposed to various risks such as interest rate risk, market risk and credit risk. Market risks include global events which could impact the value of investment securities, such as a pandemic or international conflict. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect participants' account balances and the amounts reported in the Statements of Net Assets Available for Plan Benefits.

The Plan invested in two and three mutual funds that accounted for approximately 27% and 36% of total Plan investments as of December 31, 2025 and 2024, respectively.

Financial Instruments with a Concentration of Credit Risk
The Plan's investments are held by a single trustee. The Plan's exposure to credit risk is associated with the outside entity's non-performance of their fiduciary responsibilities relating to these amounts as specified in the agreements. Benefits provided by the Plan are not insured or guaranteed by the Pension Benefit Guaranty Corporation.

3. Fair Value Measurements

The framework for measuring fair value provides a hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives highest priority to unadjusted quoted prices in active markets for identical assets (level 1) and the lowest priority to unobservable inputs (level 3). The three levels of the fair value hierarchy and inputs to the valuation methodologies are described as follows:

Level 1 inputs are unadjusted quoted prices in active markets for identical assets the Plan has the ability to access.

Level 2 inputs are other than quoted prices in active markets that are observable either directly or indirectly for the asset. Such inputs are derived principally from or corroborated by observable market data for similar assets by correlation or other means, over substantially the full contractual term of the asset, if applicable.

Level 3 inputs are unobservable and significant to the fair value measurement. Such inputs generally rely on the Plan's own assumptions about the assumptions that market participants would use in pricing the asset.

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

The following is a description of the valuation methodologies used for assets measured at fair value on a recurring basis.

Money Market Fund: The carrying amount of the money market fund is deemed to be valued at the deposit amount plus accrued interest, as determined according to stated terms.

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.

Self-directed Brokerage Account: Valued at the closing price reported on the active market on which the individual securities are traded. This account consists of common stock and money market funds.

As of December 31, 2025 and 2024, the Plan's investments are reported at level 1 within the fair value hierarchy.

4. Plan Termination

The Employer expects to continue the Plan indefinitely. However, the Employer reserves the right to amend the Plan or contributions thereto, at any time and in any manner that it deems advisable, provided that no amendment shall have the effect of diverting Plan assets for purposes other than for the exclusive benefit of the Plan participants and any Plan termination would be subject to the provisions of ERISA. In the event of Plan termination, the participants would become fully vested and entitled to receive all amounts credited to their accounts.

5. Income Tax Status

The Plan adopted a volume submitter plan document created by Fidelity who received an opinion letter dated June 30, 2020, in which the Internal Revenue Service (IRS) stated that the Plan document, as then designed, was in compliance with the applicable requirements of the IRC. Although the Plan has been amended since receiving the opinion letter, the Plan Administrator and the Plan's tax counsel believe that the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC.

GAAP requires Plan management to evaluate tax positions taken by the Plan and recognize a tax liability for any uncertain position that more likely than not would not be sustained upon examination by the IRS. 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 tax periods in progress.

6. Summary of Information Certified by the Trustee

The following is a summary of financial information and data certified by the trustee, Fidelity:

Statements of Net Assets Available for Plan Benefits at December 31, 2025 and 2024, except for contributions receivable;

Investment income and interest income from participant notes receivable on the Statement of Changes in Net Assets Available for Plan Benefits for the year ended December 31, 2025; and

Investment information provided in the supplemental schedule, Schedules of Assets (Held at End of Year) at December 31, 2025.

7. Related Party and Party-in-Interest Transactions

Plan investments are held and managed by Fidelity, the trustee of the Plan. Therefore, these transactions qualify as party-in-interest transactions. The Plan made direct payments to Fidelity for administrative services of approximately $21,000 for the year ended December 31, 2025. The Plan also made direct payments to its investment advisor of approximately $10,000 during 2025. Such costs are allocated to participants in the Plan. Participant notes receivable also qualify as party-in-interest transactions.

8. Differences from Form 5500

Differences between the Annual Return/Report of Employee Benefit Plan, Form 5500, and these financial statements are a result of different classifications between line items. Total Plan assets are in agreement.

9. Non-exempt Transactions

During 2025, the Employer failed to remit participant contributions of $10,085 to the Plan on a timely basis as prescribed in the applicable Department of Labor Regulations 29 CFR 2510.3-102. Defined contribution plans must remit employee contributions to the Plan as soon as they can be reasonably segregated from the Plan Administrator's general assets, but no later than the 15th business day of the month following the month in which the participant contributions are withheld or received by the Employer. The Employer remitted participant contributions due to the Plan during 2026. Lost earnings will be remitted in 2026.

10. Subsequent Events

Effective January 1, 2026, the Plan adopted a provision of SECURE Act 2.0, requiring catch-up contributions made by participants age 50 or older whose prior year wages from the Plan sponsor exceed the applicable statutory threshold to be treated as Roth contributions.

Effective June 15, 2026, the Employer formally adopted an amendment to the Plan to incorporate applicable provisions of the SECURE Act.

Management has evaluated subsequent events through September 28, 2026, which is the date these financial statements were available to be issued.

SHEFFIELD PHARMACEUTICALS, LLC RETIREMENT PLAN
ATTACHMENT TO SCHEDULE H, PART 4, LINE 4a-
SCHEDULE OF DELINQUENT PARTICIPANT CONTRIBUTIONS
Year Ended December 31, 2025

Employer Identification Number: 06-1560000
Plan Number: 001

Identity of Party Involved		Relationship to Plan, Employer or Other Party-in-interest
Sheffield Pharmaceuticals, LLC	*	Employer

	Total that Constitutes Non-exempt Prohibited Transactions				
	Participant Contributions Transferred Late to Plan	Contributions Not Corrected	Contributions Corrected Outside VFCP	Contributions Pending Correction in VFCP	Total Fully Corrected Under VFCP and PTE-2002-51
(1)	$ 10,085	$ 10,085	$ -	$ -	$ -

(1) 2025 delinquent participant contributions, due to failed timely remittance as prescribed in the applicable Department of Labor Regulation 29 CFR 2510.3-102, as reported on the December 31, 2025 financial statements. Principal was transmitted during the year ended December 31, 2026. Lost earnings will be remitted in 2026.

* Indicates party-in-interest to the Plan.

SHEFFIELD PHARMACEUTICALS, LLC RETIREMENT PLAN
ATTACHMENT TO SCHEDULE H, PART 4, ITEM 4i
SCHEDULE OF ASSETS (HELD AT END OF YEAR)
December 31, 2025

Schedule 2

KLR

Employer Identification Number: 06-1560000
Plan Number: 001

(a)	(b) Identity of issue, borrower, lessor or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value	(e) Current value
	Money Market Fund:		
*	Fidelity	Government Money Market Fund	$ 180,561
	Mutual Funds:		
*	Fidelity	Total Market Index Fund	1,483,562
*	Fidelity	Freedom Index 2035 Fund - Institutional Premium Class	941,556
	JPMorgan	Large Cap Growth Fund - Class R6	829,445
*	Fidelity	Freedom Index 2030 Fund - Institutional Premium Class	594,618
*	Fidelity	Freedom Index 2050 Fund - Institutional Premium Class	593,456
*	Fidelity	Freedom Index 2045 Fund - Institutional Premium Class	592,221
*	Fidelity	Freedom Index 2025 Fund - Institutional Premium Class	456,993
*	Fidelity	Freedom Index 2020 Fund - Institutional Premium Class	405,398
*	Fidelity	Freedom Index 2055 Fund - Institutional Premium Class	344,372
*	Fidelity	Freedom Index 2060 Fund - Institutional Premium Class	331,156
*	Fidelity	International Index Fund	311,660
*	Fidelity	U.S. Bond Index Fund	190,289
	American Funds	EuroPacific Growth Fund Class R-6	152,612
*	Fidelity	Freedom Index 2040 Fund - Institutional Premium Class	144,393
*	Fidelity	Growth Strategies Fund - Class K	125,331
*	Fidelity	Capital & Income Fund	87,115
*	Fidelity	Total Bond Fund	71,246
*	Fidelity	Extended Market Index Fund	67,041
	Vanguard	Explorer Fund Admiral Shares	60,212
*	Fidelity	Balanced Fund - Class K	53,616
*	Fidelity	Equity-Income Fund - Class K	49,844
	DFA	U.S. Targeted Value Portfolio Institutional Class	40,461
*	Fidelity	Freedom Index 2010 Fund - Institutional Premium Class	10,656
	BlackRock	Commodity Strategies Portfolio Class K	2,860
	DWS	Real Estate Securities Fund - Class R6	2,004
*	Fidelity	Small Cap Index Fund	1,631
*	Fidelity	Freedom Index Income Fund - Institutional Premium Class	111
*	Fidelity	Freedom Index 2065 Fund Investor Class	17
	Total Mutual Funds		7,943,876
	Self-Directed Brokerage Account		
*	Fidelity	Brokerage Link Fund	711,338
*	Participant Loans	Interest rates ranging from 4.25% to 9.5%, maturing at various dates through August 2030, collateralized by participant account balances	141,365
	Total Investments		$ 8,977,140

* Indicates party-in-interest to the Plan.

Note: All investments are participant directed; therefore, the unit and cost columns have been omitted.

Name	SSN	Employee Traditional	Employee Roth	Employer Match	401k Loan
Axline, Susan P.	SSN	300	0	40	0
Badick Jr., Richard A.	SSN	250	0	200	0
Baral, Brynn M.	SSN	120	0	40	0
Bhatt, Palakben Parth	SSN	65	0	20	0
Brown, Latrice	SSN	15	0	12	0
Cancel, Daisy I.	SSN	20	0	17.5	0
Chaney, Daniel T.	SSN	20	0	17.5	0
Collins, Amanda	SSN	20	0	16	0
Compton, Evan L.	SSN	30	0	30	0
Dawson, David M.	SSN	150	0	150	0
Delacruz, Anita M.	SSN	500	0	200	0
DeMorro, Andrew	SSN	25	25	20	0
Drescher, Donald H.	SSN	80	0	20	0
Goulet, Susan M.	SSN	1,050.00	0	200	0
Leclair, Victoria Marjorie	SSN	100	0	40	0
Graveline, Sarah Ann	SSN	10	0	10	0
Hebert, Suzanne Marie	SSN	35	0	20	0
Johnson, Jonathan William	SSN	800	0	200	0
Lacerda, Carlos B.	SSN	500	0	40	0
Lapointe, Carley M.	SSN	60	0	40	0
Manske, Ron L.	SSN	400	0	200	0
Marcille III, Frank	SSN	200	0	80	0
Marien, Peter R.	SSN	150	0	20	0
Milazzo, John M.	SSN	25	0	20	0
Mueller, Samuel T.	SSN	20	12	16	0
Niziolek Jr. Jr., Peter J	SSN	250	0	200	0
Orga, Cynthia	SSN	40	0	20	0
Pariona, Fredy G.	SSN	45	0	20	0
Parkhurst, Douglas W.	SSN	50	0	40	0
Phu, Jeffrey S.	SSN	30	125	20	0
Priest, Justin R.	SSN	30	0	20	0
Royer, Matthew W.	SSN	900	0	900	0
Saad, Rami S.	SSN	20	0	17.5	0
Shelton, Matthew James	SSN	45	0	12	0
Rossi, Aria Erin	SSN	50	0	40	0
Turano, Raymond J.	SSN	140	0	80	0
Vairo, Sabrina J	SSN	150	0	150	0
Vairo, Ronald V.	SSN	150	0	150	0
Vazquez Cotto, Alva N.	SSN	50	0	40	0
Whitten, Kimberly Mae	SSN	50	0	40	0
Curioso, Julie	SSN	0	100	40	0
Gervais, Marcel Joseph	SSN	300	0	200	0
Wang, Su	SSN	0	250	200	0

Davis, Jeffrey S.	SSN	1,000.28	0	1,000.28	0
Kwait, Todd M.	SSN	1,327.70	0	1,327.70	0

Plan Name	**Sheffield Pharmaceuticals, LLC Retirement Plan**
Plan Number	**83893**
Plan Year End	**12/31/2025**

$9,441.73 **-$1,057.39**

TRUE-UP MATCH ALLOCATION

SSN	Employee Name	True-Up Match	Corrections for Match Overages
	WILLIAM D MENCER	$3,334.55	
	WILLIAM R FULLER	$1,505.95	
	ANTHONY D SOLLIMA	$1,234.58	
	MICHAEL W CLARK	$1,179.94	
	MELIZA FALCOTELO	$621.70	
	CARLOS CANDELARIA	$279.14	
	SEAN THERRIEN	$253.60	
	DERRICK HELME	$188.60	
	CHRISTOPHER PRICE	$176.76	
	VRUNDA PATEL	$172.06	
	SU WANG	$151.70	
	JAMIE PIPER	$98.43	
	JOHN ROONEY	$88.99	
	MITCHELL BAIRD	$76.00	
	STEPHANIE VECE	$46.35	
	SELINA HALLECK	$31.66	
	AMANDA COLLINS	$0.24	
	PETER NIZIOLEK	$0.23	
	JUSTIN R PRIEST	$0.21	
	DOROTHY K ENG	$0.18	
	ALVA N VAZQUEZ COTTO	$0.11	
	PALAKBEN BHATT	$0.10	
	BRYAN J OUIMET	$0.09	
	KIMBERLY WHITTEN	$0.07	
	JENNIFER CARLSON	$0.06	
	ARIA ROSSI	$0.06	
	JONATHAN SILVA	$0.05	
	RON L MANSKE	$0.05	
	CYNTHIA TRAN	$0.04	
	ANDREW DEMORRO	$0.04	
	JOHN M MILAZZO	$0.03	
	LATRICE BROWN	$0.03	
	SAMUEL MUELLER	$0.03	
	DOUGLAS W PARKHURST	$0.02	

JEFFREY S PHU	$0.02	
MANYA JAIN	$0.02	
DAISY I CANCEL	$0.02	
FRANK MARCILLE	$0.01	
CYNTHIA M ORGA	$0.01	
DAVID M DAWSON		-$0.01
CONOR E MASSIE		-$0.01
EVAN L COMPTON		-$0.01
MATTHEW SHELTON		-$0.01
SUSAN P AXLINE		-$0.01
KYLE LEWIS		-$0.02
FREDY G PARIONA		-$0.02
DANIEL T CHANEY		-$0.02
SHEILA HOLDER		-$0.02
ALTAGRACIA Y ALVAREZ FERREIRA		-$0.03
CARLEY M LAPOINTE		-$0.04
SUZANNE HEBERT		-$0.04
CARLOS B LACERDA		-$0.06
PETER R MARIEN		-$0.06
RONALD V VAIRO		-$0.08
JONATHAN JOHNSON		-$0.09
ANITA M DELACRUZ		-$0.09
SABRINA VAIRO		-$0.10
MARCEL GERVAIS		-$0.11
RICHARD A BADICK JR		-$0.17
JULIE CURIOSO		-$0.21
BRYNN M BARAL		-$0.21
TODD M KWAIT		-$1,055.97