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.)
- [X] 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:
- [X] Form 5558
- [ ] automatic extension
- [ ] the DFVC program
- [ ] special extension (enter description)

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

Part II Basic Plan Information—enter all requested information

1a Name of plan
STARK & STARK EMPLOYEES' PROFIT SHARING PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 12/22/1976

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)
STARK & STARK, PC

P.O. BOX 5315
PRINCETON, NJ 08543-5315

2b Employer Identification Number (EIN) 22-2092476

2c Plan Sponsor's telephone number 609-896-9060

2d Business code (see instructions) 541110

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.	10/07/2026	STEPHEN D. TOWNSEND
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a	Plan administrator's name and address [X] Same as Plan Sponsor	**3b**	Administrator's EIN
		3c	Administrator's telephone number
4	If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report:	**4b**	EIN
a	Sponsor's name	**4d**	PN
c	Plan Name		

5	Total number of participants at the beginning of the plan year	**5**	307
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)**	228
a(2)	Total number of active participants at the end of the plan year	**6a(2)**	231
b	Retired or separated participants receiving benefits	**6b**	2
c	Other retired or separated participants entitled to future benefits	**6c**	78
d	Subtotal. Add lines **6a(2)**, **6b**, and **6c**.	**6d**	311
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	0
f	Total. Add lines **6d** and **6e**.	**6f**	311
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)**	303
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)**	309
h	Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.	**6h**	11
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 2G 2J 2A 2R 2T 2F 2S 3D

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

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

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

a Pension Schedules

- **(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)** [X] **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
STARK & STARK EMPLOYEES' PROFIT SHARING PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
STARK & STARK, PC

D Employer Identification Number (EIN)
22-2092476

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

BOKF, NA
P.O. BOX 880
TULSA, OK 74101

73-0780382

(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)

BOKF, NA

P.O. BOX 880
TULSA, OK 74101

(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?
19 21 25 27 52 59 60 62 63 64 68 37	TRUSTEE	132876	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [ ] No [ ]

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

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

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

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

Part I Service Provider Information (continued)

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

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

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

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

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

Part III Termination Information on Accountants and Enrolled Actuaries (see instructions)

(complete as many entries as needed)

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

SCHEDULE D (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

DFE/Participating Plan Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).

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

OMB No. 1210-0110

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
STARK & STARK EMPLOYEES' PROFIT SHARING PLAN

B Three-digit plan number (PN) ▶ 001

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
STARK & STARK, PC

D Employer Identification Number (EIN)
22-2092476

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

a Name of MTIA, CCT, PSA, or 103-12 IE: MAP POOLED INVESTMENT TRUST

b Name of sponsor of entity listed in (a): BOKF, NA

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
73-0780382-005	C	35619137

a Name of MTIA, CCT, PSA, or 103-12 IE:

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

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

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

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

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

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

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

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

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

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

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

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

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

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

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

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

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

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

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

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

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

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

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

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

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

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

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

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

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

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

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

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

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

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

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

SCHEDULE H (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Financial Information

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

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

OMB No. 1210-0110

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
STARK & STARK EMPLOYEES' PROFIT SHARING PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
STARK & STARK, PC

D Employer Identification Number (EIN)
22-2092476

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	592506
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	2500241	2526856
(2) Participant contributions	1b(2)	573167	107845
(3) Other	1b(3)	68619	93641
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	55	1720881
(2) U.S. Government securities	1c(2)	0	0
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)	308475	892900
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)	295890	275543
(9) Value of interest in common/collective trusts	1c(9)	27494233	35619137
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	99056474	110391393
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)		

		(a) Beginning of Year	(b) End of Year
1d Employer-related investments:			
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
1e Buildings and other property used in plan operation	1e		
1f Total assets (add all amounts in lines 1a through 1e)	1f	130297154	152220702
Liabilities			
1g Benefit claims payable	1g	0	0
1h Operating payables	1h		
1i Acquisition indebtedness	1i		
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	130297154	152220702

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)	2526857	
(B) Participants	2a(1)(B)	2584018	
(C) Others (including rollovers)	2a(1)(C)	254261	
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		5365136
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	78035	
(B) U.S. Government securities	2b(1)(B)		
(C) Corporate debt instruments	2b(1)(C)		
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)	23949	
(F) Other	2b(1)(F)		
(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		101984
(2) Dividends: **(A)** Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)	2835	
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	1730823	
(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		1733658
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)	47605126	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	35905496	
(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		11699630
(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)		
(B) Other	2b(5)(B)	177282	
(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		177282

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		4044531
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		2660920
c Other income	2c		
d Total income. Add all **income** amounts in column (b) and enter total	2d		25783141
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	3726708	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)		
(4) Total benefit payments. Add lines **2e(1)** through **(3)**	2e(4)		3726708
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses:			
(1) Salaries and allowances	2i(1)		
(2) Contract administrator fees	2i(2)		
(3) Recordkeeping fees	2i(3)	84338	
(4) IQPA audit fees	2i(4)		
(5) Investment advisory and investment management fees	2i(5)	45429	
(6) Bank or trust company trustee/custodial fees	2i(6)	1380	
(7) Actuarial fees	2i(7)		
(8) Legal fees	2i(8)		
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)		
(11) Other expenses	2i(11)	1738	
(12) Total administrative expenses. Add lines **2i(1)** through **(11)**	2i(12)		132885
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		3859593
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		21923548
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

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

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

(1) [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: MERCADIEN, P.C. **(2)** EIN: 22-3271712

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

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

Part IV Compliance Questions

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

During the plan year:

		Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)	**4a**		X	
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)	**4b**		X	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	**4c**		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)	**4d**		X	
e Was this plan covered by a fidelity bond?	**4e**	X		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**			

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
STARK & STARK EMPLOYEES' PROFIT SHARING PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
STARK & STARK, PC

D Employer Identification Number (EIN)
22-2092476

Part I Distributions

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

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions ..... | 1 | 0

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

EIN(s): 73-6210970

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 Q703970A .

STARK & STARK EMPLOYEES' PROFIT SHARING PLAN

FINANCIAL STATEMENTS
AND
SUPPLEMENTAL INFORMATION

December 31, 2025

STARK & STARK EMPLOYEES' PROFIT SHARING PLAN

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December 31, 2025

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INDEPENDENT AUDITORS' REPORT

To the Trustees of the
Stark & Stark Employees' Profit Sharing Plan

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

We have performed audits of the accompanying financial statements of Stark & Stark Employees' Profit Sharing 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 benefits as of December 31, 2025 and 2024, and the related statement of changes in net assets available for benefits for the year ended December 31, 2025, and the related notes to the financial statements.

Management, having determined it is permissible in the circumstances, has elected to have the audits of 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 a certification 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 C 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).

P.O. Box 7648 | Princeton, NJ 08543-7648 | 609.689.9700 | Fax 609.689.9720
MERCADIEN.COM

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 for the Financial Statements section of our report, our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an 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.

Auditors' Responsibilities for the Audit of the Financial Statements (Continued)

- 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.

Other Matter

Supplemental Schedule Required by ERISA

The supplemental schedule, Form 5500, Schedule H, Line 4(i) – Schedule of Assets (Held at End of Year), is presented for purposes of additional analysis and is not a required part of the financial statements but is supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedule, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS. For information included in the supplemental schedule that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

Supplemental Schedule Required by ERISA (Continued)

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

In our opinion:

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

- the information in the supplemental schedule related to assets held by and certified to by a qualified institution agrees to, or 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).

Mercadien, P.C.
Certified Public Accountants

October 2, 2026

STARK & STARK EMPLOYEES' PROFIT SHARING PLAN

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
December 31, 2025 and 2024

	2025	2024
ASSETS		
Investments, at fair value		
Cash and temporary investments	$ 592,506	$ 55
Mutual funds	112,112,274	99,056,474
Common stock	892,900	308,475
Common collective trusts	35,619,137	27,494,233
Total Investments	149,216,817	126,859,237
Receivables		
Notes receivable from participants	275,543	295,890
Employer contributions	2,526,856	2,500,241
Participant contributions	107,845	573,167
Accrued interest and dividends	93,641	68,619
Total Receivables	3,003,885	3,437,917
Total Assets	152,220,702	130,297,154
Net assets available for benefits	$ 152,220,702	$ 130,297,154

The accompanying notes are an integral part of the financial statements.

STARK & STARK EMPLOYEES' PROFIT SHARING PLAN

STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
Year Ended December 31, 2025

Additions to net assets attributed to	
Investment income	
Net realized and unrealized appreciation in fair value of investments	$ 18,607,969
Interest and dividend income	1,782,639
Total investment income	20,390,608
Interest income on notes receivable from participants	25,606
Contributions	
Employer	2,526,857
Participants	2,584,018
Rollovers	254,261
Total contributions	5,365,136
Total additions	25,781,350
Deductions from net assets attributed to	
Benefits paid to participants	3,724,825
Administrative expenses	132,977
Total deductions	3,857,802
Net change in net assets available for benefits	21,923,548
Net assets available for benefits, beginning of year	130,297,154
Net assets available for benefits, end of year	$ 152,220,702

The accompanying notes are an integral part of the financial statements.

A. DESCRIPTION OF PLAN

The following description of Stark & Stark Employees' Profit Sharing Plan (the "Plan") provides only general information. Participants should refer to the Plan document for a more complete description of the Plan's provisions.

General

The Plan is a defined contribution plan covering all full-time employees of Stark & Stark, P.C. (the "Plan Sponsor") who have at least six months of continuous employment. Full-time employees are eligible to participate in the Plan beginning on the first day of the following month they are hired unless they are hired on the first day of the month in which case they are immediately eligible, subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA"). BOKF, N.A. (the "Custodian") is the custodian of the Plan. The Plan was amended during 2020 to comply with the provisions of the CARES Act. The Plan was restated effective June 1, 2022.

Contributions

Contributions to the Plan by the Plan Sponsor are determined annually by management of the Plan Sponsor. At the discretion of the Plan Administrator, participants may be permitted to deposit or “rollover” into the Plan distributions they have received from other plans and certain Individual Retirement Accounts (IRAs). In addition, the Plan Sponsor, depending upon certain discrimination tests, provides all participants with the option of salary deferral contributions of up to the maximum amount allowable, subject to the Internal Revenue Service's (the "IRS") specified limits, of wages paid by the Plan Sponsor to such participant while such participant is a member of the Plan. The allocation formula for employer contributions uses non-discrimination testing techniques under Internal Revenue Code ("IRC") Section 401(a)(4). The Plan allows for Roth deferral contributions on an after-tax basis, which are subject to the same contribution limitations as stated above. The Plan permits in-plan Roth transfers. The Plan adopted an automatic contribution arrangement. Under the terms of the arrangement, a participant who fails to opt out of the Plan shall be deemed to have made a pre-tax deferral election equal to 3% of compensation. The automatic deferral percentage shall be increased by 1% on July 1 of each plan year, subject to a maximum of 6%. An employee must have been employed for at least six months for the initial escalation to commence.

The investment committee has relied on certain actuarial computations made by the Custodian or an independent actuary to demonstrate satisfaction of the non-discrimination tests. In these financial statements, the Plan has relied on the actuarial computations determined by the Custodian for the years ended December 31, 2025 and 2024, respectively.

Participant Accounts

Each participant's account is credited with the participant's contributions and an allocation of (a) the Plan Sponsor's contribution and (b) Plan earnings and investment expenses. Allocations are based on participant earnings or account balances, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account balance.

Vesting

Participants are immediately vested in their voluntary contributions, rollovers and transfers from qualified plans, plus actual earnings thereon. Vesting in the Plan Sponsor's contribution portion of their accounts plus earnings thereon is based on years of continuous service. A participant is 100% vested after six years of credited service or upon attaining normal retirement age, disability, or death.

A. DESCRIPTION OF PLAN (CONTINUED)

Payment of Benefits

On termination of service due to disability, retirement or any other reason except death, a participant will receive an amount equal to the value of the participant's vested interest in his or her account in a lump-sum amount. For termination of service due to death, the account becomes fully vested and a participant's spouse or named beneficiary will receive the value of the entire interest in the decedent's account in the form of a lump-sum distribution or an annuity paid out over the life expectancy of the surviving spouse.

For termination of service due to the death of a married participant where the participant has elected beneficiaries other than his or her spouse and where the spouse has agreed to this election, the participant's named beneficiaries may receive the vested interest in the decedent's account in a lump-sum amount. For termination of service due to death of an unmarried participant, the participant's named beneficiaries, or if no beneficiaries are named, his or her estate may receive the vested interest in the decedent's account in a lump-sum amount.

Forfeited Accounts

At December 31, 2025 and 2024, forfeited non-vested accounts totaled $24,543 and $107,930, respectively. As of each anniversary date, any amount that became forfeited during the plan year may be used by the Plan for several purposes such as payment of plan expenses or to reduce employer contributions to the Plan. Any forfeitures not used by the Plan will be allocated to participants eligible to share in the employer contribution in the same proportion that their wages bear to total wages of all such participants. During the year ended December 31, 2025, $131,496 of forfeitures were used to pay plan expenses.

Expenses of the Plan

The Plan’s administrative expenses are paid by the Plan Sponsor, as provided by the Plan document.

B. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting

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

Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America ("U.S. GAAP") requires management to make estimates and assumptions that affect the reported amounts of net assets available for benefits and changes therein. Actual results could differ from those estimates.

Investment Valuation and Income Recognition

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

B. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

Investment Valuation and Income Recognition (Continued)

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

Payment of Benefits

Benefit payments to participants are recorded upon distribution.

Notes Receivable from Participants

Effective November 1, 2018, participants were permitted to take loans (notes receivable from participants) from the Plan. Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Delinquent notes receivable are treated as distributions based upon the terms of the Plan document. Participants may borrow from their account a minimum of $1,000 and up to a maximum amount equal to the lesser of 50% of their vested account balance, or $50,000 minus the difference between the highest outstanding balance of loans in the past 12 months and the outstanding balance of loans from the Plan on the date the loan is made. The notes receivable are secured by the vested balance in the participants' accounts and must bear a reasonable rate of interest at the time of the borrowing. Principal and interest are paid over a period of up to five years, with equal installments no less frequently than quarterly. Loans up to 15 years are permitted for the purchase of a principal residence. Participants are permitted to have a maximum of one outstanding note receivable at any time. The interest rate on notes receivable from participants ranged from 7.50% to 10.50% at December 31, 2025 and 2024.

Subsequent Events

Management has evaluated subsequent events for potential recognition and disclosure through October 2, 2026, the date the financial statements were available to be issued. No items were determined by management to require disclosure.

C. INFORMATION CERTIFIED BY CUSTODIAN

The plan administrator has elected the method of annual reporting compliance permitted by ERISA Section 103(a)(3)(C) pursuant to 29 CFR 2520.103-8 of the Department of Labors' Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, BOKF, N.A., a qualified institution, has certified that the following investment information included in the accompanying financial statements and ERISA-required supplemental schedule is complete and accurate:

- Investments and notes receivable from participants as shown in the statements of net assets available for benefits as of December 31, 2025 and 2024.
- Total investment income and interest income on notes receivable from participants as shown in the statement of changes in net assets available for benefits for the year ended December 31, 2025.
- Investment information, and notes receivable from participants, included in the schedule of assets (held at end of year) as of December 31, 2025, as shown on the ERISA-required supplemental schedule.

C. INFORMATION CERTIFIED BY CUSTODIAN (CONTINUED)

At the request of the Plan administrator, the Plan's independent auditors did not perform auditing procedures with respect to this certified investment information, except for comparing such certified investment information to the related investment information included in the financial statements and ERISA-required schedule.

D. FAIR VALUE MEASUREMENTS

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

Level 1 — Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access.

Level 2 — Inputs to the valuation methodology include:

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

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

Level 3 — Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

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

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

Mutual funds: Valued at the net asset value ("NAV") of shares held by the Plan at year end. The NAV is calculated as of the close of the New York Stock Exchange ("NYSE") each day the NYSE is open.

Common stock – Valued at the market price of the underlying shares of stock held by the Plan as of the close of the NYSE each day the NYSE is open.

Common collective trust: Stated at NAV as reported to the Plan by the Custodian based on the market values of the underlying investments of the fund. The fund is not required to publish a daily NAV, therefore the NAV is a practical expedient in determining the fair value of the fund.

D. FAIR VALUE MEASUREMENTS (CONTINUED)

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

The following tables set forth by level, within the fair value hierarchy, the Plan's investments at fair value as of December 31, 2025 and 2024:

	Investments at Fair Value as of December 31, 2025			
	Level 1	Level 2	Level 3	Total
Cash and temporary investments	$ 592,506	$ -	$ -	$ 592,506
Mutual funds	112,112,274	-	-	112,112,274
Common stock	892,900	-	-	892,900
Total investments at fair value	$ 113,597,680	$ -	$ -	113,597,680
Investments at NAV				35,619,137
Total investments at fair value				$ 149,216,817

	Investments at Fair Value as of December 31, 2024			
	Level 1	Level 2	Level 3	Total
Cash and temporary investments	$ 55	$ -	$ -	$ 55
Mutual funds	99,056,474	-	-	99,056,474
Common stock	308,475	-	-	308,475
Total investments at fair value	$ 99,365,004	$ -	$ -	99,365,004
Investments at NAV				27,494,233
Total investments at fair value				$ 126,859,237

Fair Value Estimated Using Net Asset Value per Share

The following table summarizes investments measured at fair value based on NAV per share as a practical expedient as of December 31, 2025 and 2024:

	Fair Value Using Net Asset Value per Share				
	Fair Value at December 31, 2025	Fair Value at December 31, 2024	Unfunded Commitment	Redemption Frequency	Redemption Notice Period
Common collective trust	$ 35,619,137	$ 27,494,233	$ -	Immediate	None

Changes in Fair Value Levels

To assess the appropriate classification of investments within the fair value hierarchy, the availability of market data is monitored. Changes in economic conditions or valuation techniques may require the transfer of investments from one fair value level to another. In such instances, the transfer is reported at the end of the reporting period.

The Plan evaluates the significance of transfers between levels based upon the nature of the investment and size of the transfer relative to total net assets available for benefits. For the years ended December 31, 2025 and 2024, there were no transfers between levels.

E. PLAN TERMINATION

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

F. CONCENTRATION OF CREDIT RISK AND UNCERTAINTIES

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

G. TRANSACTIONS WITH PARTIES-IN-INTEREST

Stark & Stark, P.C. is the Plan Sponsor and administrator and pays certain administrative costs including accounting, legal and consulting fees on behalf of the Plan. Some of the trustees are also participants of the Plan.

H. TAX STATUS

The IRS has determined and informed the Plan by a letter dated June 30, 2020, that the Plan and related trust are designed in accordance with applicable sections of the IRC. The Plan has been amended since receiving the determination letter. However, the Plan Administrator and the Plan's tax counsel believe that the Plan is currently designed and being operated in compliance with the applicable requirements of the IRC.

U.S. GAAP requires plan management to evaluate tax positions taken by the Plan and recognize a tax liability if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the IRS. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

SUPPLEMENTAL INFORMATION

STARK & STARK EMPLOYEES' PROFIT SHARING PLAN

EIN # 22-2092476 Plan # 001
FORM 5500, SCHEDULE H, LINE 4(i) - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
December 31, 2025

(a)	(b) Identity of Issuer, Borrower, Lessor, or Similar Party	(c) Description of Investment, Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	(e) Current Value
	Cash	Cash and Temporary Investments	$ 592,506
	Mutual Funds		
	Fidelity Contrafund Inc	Mutual Fund	26,048,004
	Fidelity Sel Med Eq & Sys	Mutual Fund	10,992
	American New World Fd-F	Mutual Fund	50,291
	Vanguard Div Grwth-Inv	Mutual Fund	39,640
	Vanguard Equity Income-Inv	Mutual Fund	686
	Vanguard Balanced Index-Inv	Mutual Fund	621
	Vanguard Midcap Val Indx-Adm	Mutual Fund	53,826
	Vanguard High Div Yld Invst	Mutual Fund	677
	Vanguard S/C Indx - Adm	Mutual Fund	34,176
	Vanguard Mid Cap Index - Adm	Mutual Fund	7,114,387
	Vanguard Tot Stk Mkt Indx - Inst	Mutual Fund	20,376,894
	Vanguard Tot Stk Mkt Indx - Adm	Mutual Fund	121,257
	Vanguard Div Apprec Indx-Adm	Mutual Fund	460,398
	Met West Tot Ret Bd - I	Mutual Fund	5,036,913
	Vanguard Health Care - Adm	Mutual Fund	43,207
	PIMCO Inc - Instl	Mutual Fund	10,529
	Vanguard Interm-Term Treas-Adm	Mutual Fund	40
	Vanguard S/T Bd Indx - Adm	Mutual Fund	6,298,125
	Invesco Govt&agncy-Inst	Mutual Fund	1,697,510
	Cavanal Hill Govt Sec Mmkt-Admin	Mutual Fund	23,371
	Dodge & Cox Global Stock	Mutual Fund	706,801
	Massmutual Sel M/C Gr Eq II-I	Mutual Fund	2,141,020
	Pfg Br Target Alloc Eq Strat-R	Mutual Fund	41,335
	Vanguard Health Care - Inv	Mutual Fund	52,154
	Vanguard Intl High Div Adm	Mutual Fund	708
	Vanguard Intl Prot Secs-Adm	Mutual Fund	69,831
	Vanguard Intrmd Bd Indx Adm	Mutual Fund	267,661
	Vanguard S/T Corp Bd Indx-Adm	Mutual Fund	551,128
	Vanguard S/T Treasury-Adm	Mutual Fund	361,591
	Fidelity Sel Semiconductors Ret	Mutual Fund	756,296
	Fidelity Select Pharm Fd	Mutual Fund	27,252
	Fidelity Select Tech - Ret	Mutual Fund	673,087
	Fidelity Trend Fd Inc	Mutual Fund	165,430
	Franklin Dynatech Adv	Mutual Fund	41,759
	Invesco Steelpath MLP Slct	Mutual Fund	704
	PFG AMER GRWTH STRAT-R	Mutual Fund	316,727
	Pfg Sector Eq Business Cyc-R	Mutual Fund	52,972
	T Rowe Blue Chip grwth-Inv	Mutual Fund	100,376
	Vanguard Val Indx-Adm	Mutual Fund	56,384
	Vanguard 500 Indx-Adm	Mutual Fund	589,664
	PFG JP Morgan Tactical Moderate Strat I	Mutual Fund	69,535
	Pfg Meeder Tactical Strat-R	Mutual Fund	23,372
	PFG BNY Mellon Diversifier Strategy Fund Class R	Mutual Fund	37,283
	PFG Janus Henderson Tactical Inc Stgy	Mutual Fund	26,893
	Vanguard S/T Federal-Adm	Mutual Fund	108,461
	Vanguard Ultra S/T Bd-Adm	Mutual Fund	161,502
	Vanguard REIT Indx-Adm	Mutual Fund	7,686
	Fidelity Sel Broker & Invst	Mutual Fund	20,342
	John Hancock Regional Bank-I	Mutual Fund	14,707
	Vanguard Eq Inc-Adm	Mutual Fund	7,847,030
	Vanguard Fincls Indx-Adm	Mutual Fund	15,579
	Vanguard S/C Grwth Indx-Adm	Mutual Fund	36,442

STARK & STARK EMPLOYEES' PROFIT SHARING PLAN

EIN # 22-2092476 Plan # 001
FORM 5500, SCHEDULE H, LINE 4(i) - SCHEDULE OF ASSETS (HELD AT END OF YEAR) (CONTINUED)
December 31, 2025

(a)	(b) Identity of Issuer, Borrower, Lessor, or Similar Party	(c) Description of Investment, Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	(e) Current Value
	Mutual Funds (Continued)		
	PFG Janus Henderson Blncd Strtgy I	Mutual Fund	85,237
	PFG American Funds Cnsrvtv Inc Stratgy-R	Mutual Fund	70,878
	Vanguard Info Tech Indx- Adm	Mutual Fund	425
	Vanguard Intrm Trm Corp Bd-Adm	Mutual Fund	305,235
	Vanguard S/T Invmt Grade-Inv	Mutual Fund	5
	Pimco Comm Real Reat Strat-Inst	Mutual Fund	27,994
	DFA US Small Cap Growth Instl	Mutual Fund	26,894
	Dodge & Cox International Stock Fund Class X	Mutual Fund	6,360,377
	Vanguard Explorer Fund Admiral Shares	Mutual Fund	26,074
	Principal Real Estate Securities Fund Class R6	Mutual Fund	865,170
	Flexinsured Account MMF Cfid FDIC Mirrored Sweep	Mutual Fund	1,487,121
	Vanguard Treasury Money Market Investor	Mutual Fund	1,817,810
	Federated Hermes Institutional Prime Obligations Fund	Mutual Fund	255,733
	Federated Hermes Government Ultrashort Fund, Institutional Shares	Mutual Fund	276,833
	Fidelity Inflation-Protected Bond Index Fund - Institutional Class	Mutual Fund	76,629
	Federated Hermes Total Return Bond Fund	Mutual Fund	1,701,199
	Federated Hermes Institutional High Yield Bond Fund	Mutual Fund	186,446
	BNY Mellon Global Fixed Income - Y	Mutual Fund	62,900
	T. Rowe Price International Bond I	Mutual Fund	63,909
	iShares J.P. Morgan USD Emerging Markets Bond ETF	Mutual Fund	68,840
	Emerald Growth Fund Institutional Class	Mutual Fund	44,218
	Federated Hermes MDT Large Cap Value Fund Institutional Shares	Mutual Fund	486,563
	Goldman Sachs International Small Cap Insights Fund Institutional Cla:	Mutual Fund	81,117
	iShares Core MSCI Emerging Markets ETF	Mutual Fund	168,319
	MFS International Equity Fund Class R6	Mutual Fund	386,083
	Nuveen Large Cap Value Index Fund R6 Class	Mutual Fund	523,827
	PFG Global Equity Index Strategy Fund Class I	Mutual Fund	24,588
	SPDR Portfolio S&P 400 Mid Cap ETF	Mutual Fund	67,697
	Vanguard Russell 1000 Growth Index Fund ETF	Mutual Fund	513,907
	iShares North American Natural Resources ETF	Mutual Fund	214,053
	Calamos Market Neutral Income Fund Institutional Class	Mutual Fund	79,219
	iShares Bitcoin Trust ETF	Mutual Fund	3,624
	Fidelity MSCI Real Estate Index ETF	Mutual Fund	187,988
	Vanguard Core BD-ADM	Mutual Fund	10,394
	Cambria Tail Risk ETF	Mutual Fund	10,916
	Eupac-R6	Mutual Fund	2,181,560
	John Hancock Disc Val	Mutual Fund	1,102,782
	NeuBberger Genesis-R6	Mutual Fund	1,940,222
	Schwab U.S Mid-Cap ETF	Mutual Fund	4,571
	Schwab U.S Small-Cap ETF	Mutual Fund	4,642
	SPDR S&P 500 ETF Trust	Mutual Fund	17,141
	SPDR Portfolio S&P 500 Mid Cap ETF	Mutual Fund	9,816
	Vanguard S/C Indx-Adm	Mutual Fund	7,469,115
	JP Morgan Equity Premium Income	Mutual Fund	1,030
	US Treasury 6 Month Bill ETF	Mutual Fund	49,917
	Total Mutual Funds		112,112,274

STARK & STARK EMPLOYEES' PROFIT SHARING PLAN

EIN # 22-2092476 Plan # 001
FORM 5500, SCHEDULE H, LINE 4(i) - SCHEDULE OF ASSETS (HELD AT END OF YEAR) (CONTINUED)
December 31, 2025

(a)	(b) Identity of Issuer, Borrower, Lessor, or Similar Party	(c) Description of Investment, Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	(e) Current Value
	Common Stock		
	Eli Lilly & Co	Common Stock	214,936
	Exxon Mobil Corporation	Common Stock	12,034
	Amazon.Com Inc	Common Stock	34,623
	Chewy Inc	Common Stock	11,568
	Rivian Automotive Inc	Common Stock	493
	Apple Inc Com	Common Stock	31,264
	Kinsale Capital Group Inc	Common Stock	3,911
	Novo-Nordisk A/S-Spons Adr	Common Stock	51
	Nvidia Corp	Common Stock	251,775
	Servicenow Inc	Common Stock	766
	Shopify Inc W/I	Common Stock	28,170
	Klarna Group Plc	Common Stock	11,564
	Mp Material Corp	Common Stock	25,260
	Wheaton Precious Metals	Common Stock	23,504
	Boeing Co	Common Stock	21,712
	Zillow Group Inc	Common Stock	6,822
	Costco Wholesale Corp	Common Stock	43,117
	Arm Holding Plc Adr	Common Stock	24,048
	Lyft Inc	Common Stock	2,421
	Nintendo Co Ltd	Common Stock	4,225
	Palo Alto Networks	Common Stock	18,420
	Netflix Inc	Common Stock	46,880
	Ge Vernova Inc	Common Stock	65,357
	Grab Holdings Ltd	Common Stock	9,979
	Total Common Stock		892,900
	Common Collective Trusts		
*	BOK Financial Retirement 2020 III	Common Collective Trust	4,283,335
*	BOK Financial Retirement 2030 III	Common Collective Trust	13,641,512
*	BOK Financial Retirement 2040 III	Common Collective Trust	7,447,205
*	BOK Financial Retirement 2050 III	Common Collective Trust	5,153,372
*	BOK Financial Retirement 2060 III	Common Collective Trust	1,418,173
*	BOK Financial Retirement 2070 III	Common Collective Trust	404,492
*	BOK Financial Retirement Conservativ III	Common Collective Trust	1,165,239
*	BOK Financial Start Alternatives III	Common Collective Trust	786,530
*	BOK Financial Retirement Income III	Common Collective Trust	1,319,279
	Total Common Collective Trusts		35,619,137
*	Notes receivable from participants: interest rates from 7.50% - 10.50%, maturities through October 24, 2030		275,543
	Total assets held at end of year		$ 149,492,360

* Indicates a party-in-interest to the Plan.

Column (d) has been omitted as investments are participant directed.

The above information has been certified by BOKF, N.A, the Custodian, as complete and accurate.

STARK & STARK EMPLOYEES' PROFIT SHARING PLAN

EIN # 22-2092476 Plan # 001
FORM 5500, SCHEDULE H, LINE 4(i) - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
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	Mutual Funds		
	Fidelity Contrafund Inc	Mutual Fund	26,048,004
	Fidelity Sel Med Eq & Sys	Mutual Fund	10,992
	American New World Fd-F	Mutual Fund	50,291
	Vanguard Div Grwth-Inv	Mutual Fund	39,640
	Vanguard Equity Income-Inv	Mutual Fund	686
	Vanguard Balanced Index-Inv	Mutual Fund	621
	Vanguard Midcap Val Indx-Adm	Mutual Fund	53,826
	Vanguard High Div Yld Invst	Mutual Fund	677
	Vanguard S/C Indx - Adm	Mutual Fund	34,176
	Vanguard Mid Cap Index - Adm	Mutual Fund	7,114,387
	Vanguard Tot Stk Mkt Indx - Inst	Mutual Fund	20,376,894
	Vanguard Tot Stk Mkt Indx - Adm	Mutual Fund	121,257
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	Vanguard Health Care - Adm	Mutual Fund	43,207
	PIMCO Inc - Instl	Mutual Fund	10,529
	Vanguard Interm-Term Treas-Adm	Mutual Fund	40
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	Massmutual Sel M/C Gr Eq II-I	Mutual Fund	2,141,020
	Pfg Br Target Alloc Eq Strat-R	Mutual Fund	41,335
	Vanguard Health Care - Inv	Mutual Fund	52,154
	Vanguard Intl High Div Adm	Mutual Fund	708
	Vanguard Intl Prot Secs-Adm	Mutual Fund	69,831
	Vanguard Intrmd Bd Indx Adm	Mutual Fund	267,661
	Vanguard S/T Corp Bd Indx-Adm	Mutual Fund	551,128
	Vanguard S/T Treasury-Adm	Mutual Fund	361,591
	Fidelity Sel Semiconductors Ret	Mutual Fund	756,296
	Fidelity Select Pharm Fd	Mutual Fund	27,252
	Fidelity Select Tech - Ret	Mutual Fund	673,087
	Fidelity Trend Fd Inc	Mutual Fund	165,430
	Franklin Dynatech Adv	Mutual Fund	41,759
	Invesco Steelpath MLP Slct	Mutual Fund	704
	PFG AMER GRWTH STRAT-R	Mutual Fund	316,727
	Pfg Sector Eq Business Cyc-R	Mutual Fund	52,972
	T Rowe Blue Chip grwth-Inv	Mutual Fund	100,376
	Vanguard Val Indx-Adm	Mutual Fund	56,384
	Vanguard 500 Indx-Adm	Mutual Fund	589,664
	PFG JP Morgan Tactical Moderate Strat I	Mutual Fund	69,535
	Pfg Meeder Tactical Strat-R	Mutual Fund	23,372
	PFG BNY Mellon Diversifier Strategy Fund Class R	Mutual Fund	37,283
	PFG Janus Henderson Tactical Inc Stgy	Mutual Fund	26,893
	Vanguard S/T Federal-Adm	Mutual Fund	108,461
	Vanguard Ultra S/T Bd-Adm	Mutual Fund	161,502
	Vanguard REIT Indx-Adm	Mutual Fund	7,686
	Fidelity Sel Broker & Invst	Mutual Fund	20,342
	John Hancock Regional Bank-I	Mutual Fund	14,707
	Vanguard Eq Inc-Adm	Mutual Fund	7,847,030
	Vanguard Fincls Indx-Adm	Mutual Fund	15,579
	Vanguard S/C Grwth Indx-Adm	Mutual Fund	36,442

STARK & STARK EMPLOYEES' PROFIT SHARING PLAN

EIN # 22-2092476 Plan # 001
FORM 5500, SCHEDULE H, LINE 4(i) - SCHEDULE OF ASSETS (HELD AT END OF YEAR) (CONTINUED)
December 31, 2025

(a)	(b) Identity of Issuer, Borrower, Lessor, or Similar Party	(c) Description of Investment, Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	(e) Current Value
	Mutual Funds (Continued)		
	PFG Janus Henderson Blncd Strtgy I	Mutual Fund	85,237
	PFG American Funds Cnsrvtv Inc Stratgy-R	Mutual Fund	70,878
	Vanguard Info Tech Indx- Adm	Mutual Fund	425
	Vanguard Intrm Trm Corp Bd-Adm	Mutual Fund	305,235
	Vanguard S/T Invmt Grade-Inv	Mutual Fund	5
	Pimco Comm Real Reat Strat-Inst	Mutual Fund	27,994
	DFA US Small Cap Growth Instl	Mutual Fund	26,894
	Dodge & Cox International Stock Fund Class X	Mutual Fund	6,360,377
	Vanguard Explorer Fund Admiral Shares	Mutual Fund	26,074
	Principal Real Estate Securities Fund Class R6	Mutual Fund	865,170
	Flexinsured Account MMF Cfid FDIC Mirrored Sweep	Mutual Fund	1,487,121
	Vanguard Treasury Money Market Investor	Mutual Fund	1,817,810
	Federated Hermes Institutional Prime Obligations Fund	Mutual Fund	255,733
	Federated Hermes Government Ultrashort Fund, Institutional Shares	Mutual Fund	276,833
	Fidelity Inflation-Protected Bond Index Fund - Institutional Class	Mutual Fund	76,629
	Federated Hermes Total Return Bond Fund	Mutual Fund	1,701,199
	Federated Hermes Institutional High Yield Bond Fund	Mutual Fund	186,446
	BNY Mellon Global Fixed Income - Y	Mutual Fund	62,900
	T. Rowe Price International Bond I	Mutual Fund	63,909
	iShares J.P. Morgan USD Emerging Markets Bond ETF	Mutual Fund	68,840
	Emerald Growth Fund Institutional Class	Mutual Fund	44,218
	Federated Hermes MDT Large Cap Value Fund Institutional Shares	Mutual Fund	486,563
	Goldman Sachs International Small Cap Insights Fund Institutional Cla	Mutual Fund	81,117
	iShares Core MSCI Emerging Markets ETF	Mutual Fund	168,319
	MFS International Equity Fund Class R6	Mutual Fund	386,083
	Nuveen Large Cap Value Index Fund R6 Class	Mutual Fund	523,827
	PFG Global Equity Index Strategy Fund Class I	Mutual Fund	24,588
	SPDR Portfolio S&P 400 Mid Cap ETF	Mutual Fund	67,697
	Vanguard Russell 1000 Growth Index Fund ETF	Mutual Fund	513,907
	iShares North American Natural Resources ETF	Mutual Fund	214,053
	Calamos Market Neutral Income Fund Institutional Class	Mutual Fund	79,219
	iShares Bitcoin Trust ETF	Mutual Fund	3,624
	Fidelity MSCI Real Estate Index ETF	Mutual Fund	187,988
	Vanguard Core BD-ADM	Mutual Fund	10,394
	Cambria Tail Risk ETF	Mutual Fund	10,916
	Eupac-R6	Mutual Fund	2,181,560
	John Hancock Disc Val	Mutual Fund	1,102,782
	NeuBberger Genesis-R6	Mutual Fund	1,940,222
	Schwab U.S Mid-Cap ETF	Mutual Fund	4,571
	Schwab U.S Small-Cap ETF	Mutual Fund	4,642
	SPDR S&P 500 ETF Trust	Mutual Fund	17,141
	SPDR Portfolio S&P 500 Mid Cap ETF	Mutual Fund	9,816
	Vanguard S/C Indx-Adm	Mutual Fund	7,469,115
	JP Morgan Equity Premium Income	Mutual Fund	1,030
	US Treasury 6 Month Bill ETF	Mutual Fund	49,917
	Total Mutual Funds		112,112,274

STARK & STARK EMPLOYEES' PROFIT SHARING PLAN

EIN # 22-2092476 Plan # 001
FORM 5500, SCHEDULE H, LINE 4(i) - SCHEDULE OF ASSETS (HELD AT END OF YEAR) (CONTINUED)
December 31, 2025

(a)	(b) Identity of Issuer, Borrower, Lessor, or Similar Party	(c) Description of Investment, Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	(e) Current Value
	Common Stock		
	Eli Lilly & Co	Common Stock	214,936
	Exxon Mobil Corporation	Common Stock	12,034
	Amazon.Com Inc	Common Stock	34,623
	Chewy Inc	Common Stock	11,568
	Rivian Automotive Inc	Common Stock	493
	Apple Inc Com	Common Stock	31,264
	Kinsale Capital Group Inc	Common Stock	3,911
	Novo-Nordisk A/S-Spons Adr	Common Stock	51
	Nvidia Corp	Common Stock	251,775
	Servicenow Inc	Common Stock	766
	Shopify Inc W/I	Common Stock	28,170
	Klarna Group Plc	Common Stock	11,564
	Mp Material Corp	Common Stock	25,260
	Wheaton Precious Metals	Common Stock	23,504
	Boeing Co	Common Stock	21,712
	Zillow Group Inc	Common Stock	6,822
	Costco Wholesale Corp	Common Stock	43,117
	Arm Holding Plc Adr	Common Stock	24,048
	Lyft Inc	Common Stock	2,421
	Nintendo Co Ltd	Common Stock	4,225
	Palo Alto Networks	Common Stock	18,420
	Netflix Inc	Common Stock	46,880
	Ge Vernova Inc	Common Stock	65,357
	Grab Holdings Ltd	Common Stock	9,979
	Total Common Stock		892,900
	Common Collective Trusts		
*	BOK Financial Retirement 2020 III	Common Collective Trust	4,283,335
*	BOK Financial Retirement 2030 III	Common Collective Trust	13,641,512
*	BOK Financial Retirement 2040 III	Common Collective Trust	7,447,205
*	BOK Financial Retirement 2050 III	Common Collective Trust	5,153,372
*	BOK Financial Retirement 2060 III	Common Collective Trust	1,418,173
*	BOK Financial Retirement 2070 III	Common Collective Trust	404,492
*	BOK Financial Retirement Conservativ III	Common Collective Trust	1,165,239
*	BOK Financial Start Alternatives III	Common Collective Trust	786,530
*	BOK Financial Retirement Income III	Common Collective Trust	1,319,279
	Total Common Collective Trusts		35,619,137
*	Notes receivable from participants: interest rates from 7.50% - 10.50%, maturities through October 24, 2030		275,543
	Total assets held at end of year		$ 149,492,360

* Indicates a party-in-interest to the Plan.

Column (d) has been omitted as investments are participant directed.

The above information has been certified by BOKF, N.A, the Custodian, as complete and accurate.