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
HEWLETT PACKARD ENTERPRISE PUERTO RICO TAX SAVING CAPITAL ACCUMULATION PLAN

1b Three-digit plan number (PN) ▶ 002

1c Effective date of plan 03/10/1992

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)
HEWLETT PACKARD ENTERPRISE IV LLC

PO BOX 4048
AGUADILLA, PR 00605-4046

2b Employer Identification Number (EIN) 66-1046467

2c Plan Sponsor's telephone number 787-658-4137

2d Business code (see instructions) 335900

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.	10/08/2026	MARTIN CASTILLO
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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

5	Total number of participants at the beginning of the plan year	**5**	1218
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)**	760
a(2)	Total number of active participants at the end of the plan year	**6a(2)**	824
b	Retired or separated participants receiving benefits	**6b**	4
c	Other retired or separated participants entitled to future benefits	**6c**	440
d	Subtotal. Add lines **6a(2)**, **6b**, and **6c**.	**6d**	1268
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	0
f	Total. Add lines **6d** and **6e**.	**6f**	1268
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)**	1197
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)**	1245
h	Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.	**6h**	6
7	Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

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

2E 2F 2G 3C 3H

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

9a Plan funding arrangement (check all that apply)		**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)** [ ] **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
HEWLETT PACKARD ENTERPRISE PUERTO RICO TAX SAVING CAPITAL ACCUMULATION PLAN

B Three-digit plan number (PN) ▶ 002

C Plan sponsor's name as shown on line 2a of Form 5500
HEWLETT PACKARD ENTERPRISE IV LLC

D Employer Identification Number (EIN)
66-1046467

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

FIDELITY INVESTMENT INSTITUTIONAL

04-2647786

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

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

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

FIDELITY INVESTMENTS INSTITUTIONAL

04-2647786

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
37 64	RECORDKEEPER	11478	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [X] 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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(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.
ABF/S SM CAP GRTH R5-SS&C INVESTOR 2000 CROWN COLONY DRIVE QUINCY, MA 02169	0.04%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(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.
HARBOR CAP APP INST-HARBOR SERVICE 34-1953399	0.10%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(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.
HRDG LVNR INTL EQ IS-NORTHERN TRUST 333 SOUTH WABASH AVENUE CHICAGO, IL 60604	0.15%

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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(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.
NYLI/E US EQ YLD I NYLIM SERVICE 52-2206685	0.15%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(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.
TOUCHSTN MIDCPGR IS - BNY MELLON	500 ROSS STREET PITTSBURGH, PA 53442	0.07%

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(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.
VRS PARTNERS Y - FIS	14785 PRESTON ROAD SUITE 1000 DALLAS, TX 75254	0.10%

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

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

(complete as many entries as needed)

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

SCHEDULE H (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Financial Information

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

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

OMB No. 1210-0110

2025

This Form is Open to Public Inspection

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

A Name of plan
HEWLETT PACKARD ENTERPRISE PUERTO RICO TAX SAVING CAPITAL ACCUMULATION PLAN

B Three-digit plan number (PN) ▶ 002

C Plan sponsor's name as shown on line 2a of Form 5500
HEWLETT PACKARD ENTERPRISE IV LLC

D Employer Identification Number (EIN)
66-1046467

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		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)		
(2) Participant contributions	1b(2)		
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	18871835	20559257
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)	3543091	4298548
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	206038352	235902523
(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	228453278	260760328
Liabilities			
1g Benefit claims payable	1g		
1h Operating payables	1h		
1i Acquisition indebtedness	1i		
1j Other liabilities	1j		
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	228453278	260760328

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)	2188218	
(B) Participants	2a(1)(B)	5227036	
(C) Others (including rollovers)	2a(1)(C)	2281153	
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		9696407
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	871588	
(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)	325388	
(F) Other	2b(1)(F)		
(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		1196976
(2) Dividends: **(A)** Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	13266060	
(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		13266060
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)		
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		0
(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		0

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		23046005
c Other income	2c		
d Total income. Add all **income** amounts in column (b) and enter total	2d		47205448
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	14882487	
(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)		14882487
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		4433
h Interest expense	2h		
i Administrative expenses:			
(1) Salaries and allowances	2i(1)		
(2) Contract administrator fees	2i(2)		
(3) Recordkeeping fees	2i(3)	11478	
(4) IQPA audit fees	2i(4)		
(5) Investment advisory and investment management fees	2i(5)		
(6) Bank or trust company trustee/custodial fees	2i(6)		
(7) Actuarial fees	2i(7)		
(8) Legal fees	2i(8)		
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)		
(11) Other expenses	2i(11)		
(12) Total administrative expenses. Add lines **2i(1)** through **(11)**	2i(12)		11478
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		14898398
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		32307050
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: YANIRA ROSARIO CPA LLC **(2)** EIN: 66-1059703

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
HEWLETT PACKARD ENTERPRISE PUERTO RICO TAX SAVING CAPITAL ACCUMULATION PLAN

B Three-digit plan number (PN) ▶ 002

C Plan sponsor's name as shown on line 2a of Form 5500
HEWLETT PACKARD ENTERPRISE IV LLC

D Employer Identification Number (EIN)
66-1046467

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): 04-6568107

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

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

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

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

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

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

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

6 a	Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived)	6a	
b	Enter the amount contributed by the employer to the plan for this plan year	6b	
c	Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount)	6c	

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

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

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

Part III Amendments

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

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

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

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

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

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

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

☐ Yes.

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

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

☐ No. Other. Provide explanation._____

Part VII IRS Compliance Questions

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

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

☐ Design-based safe harbor method

☐ "Prior year" ADP test

☐ "Current year" ADP test

☒ N/A

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

YANIRA ROSARIO CPA LLC
Certified Public Accountants
and Business Advisors

Hewlett Packard Enterprise Puerto Rico
Tax Savings Capital Accumulation Plan

Financial Statements
As of December 31, 2025
Together with Independent Auditors' Report

Hewlett Packard Enterprise Puerto Rico Tax Savings Capital Accumulation Plan

Financial Statements

December 31, 2025

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YANIRA ROSARIO CPA LLC
Certified Public Accountants
and Business Advisors

Independent Auditors' Report

To the Plan Administrator of
Hewlett Packard Enterprise Puerto Rico Tax Savings Capital Accumulation Plan:

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

We have performed the audits of the financial statements of **Hewlett Packard Enterprise Puerto Rico Tax Savings Capital Accumulation 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 **Hewlett Packard Enterprise Puerto Rico Tax Savings Capital Accumulation 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 audit need not extend to any statements or information related to assets held for investment of the Plan (investment information) by a bank or similar institution or insurance carrier that is regulated, supervised, and subject to periodic examination by a state or federal agency, provided that the statements or information regarding assets so held are prepared and certified to by the bank or similar institution or insurance carrier in accordance with 29 CFR 2520.103-5 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA (qualified institution).

Management has obtained certifications from a qualified institution as of December 31, 2025 and 2024, and for the year ended December 31, 2025, stating that the certified investment information 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 accompanying financial statements, other than those agreed to or derived from the certified investment information, are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America.

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

Basis for Opinion

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 **Hewlett Packard Enterprise Puerto Rico Tax Savings Capital Accumulation 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 **Hewlett Packard Enterprise Puerto Rico Tax Savings Capital Accumulation Plan**'s ability to continue as a going concern for within one year after the date the financial statements were available to be issued.

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

Auditors' Responsibilities for the Audit of the Financial Statements

Except as described in the Scope and Nature of the ERISA Section 103(a)(3)(C) Audit section of our report, our objectives are to obtain reasonable assurance about whether the financial statements taken 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 there 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 aggregate, they would influence the judgment made by a reasonable user based on financial statements.

In performing an audit in accordance with GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the **Hewlett Packard Enterprise Puerto Rico Tax Savings Capital Accumulation 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 **Hewlett Packard Enterprise Puerto Rico Tax Savings Capital Accumulation 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 taken 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 audits.

YANIRA ROSARIO CPA LLC
Certified Public Accountants
and Business Advisors

Other Matter — Supplemental Schedule Required by ERISA

The supplemental schedule of assets held for investment purposes for December 31, 2025, 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 audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS. For information included in the supplemental schedules that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

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

- the information in the supplemental schedule related to assets held for investment purposes 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).

San Juan, Puerto Rico,
September 27, 2026.

COLEGIO DE CONTADORES PÚBLICOS AUTORIZADOS DE PUERTO RICO
CPA
$5.00 SELLO $2.00 ÍNDICE

D5523-13

Hewlett Packard Enterprise Puerto Rico Tax
Savings Capital Accumulation Plan

Hewlett Packard Enterprise Puerto Rico Tax Savings Capital Accumulation Plan

Statements of Net Assets Available for Benefits
December 31, 2025 and 2024

	2025	2024
Assets:		
Investments, at fair value		
Mutual Funds	$235,902,523	$206,038,352
Short-term Investments	20,559,257	18,871,835
Total Investments, at fair value	256,461,780	224,910,187
Notes Receivable from Participants	4,298,548	3,543,091
Net Assets Available for Benefits	$260,760,328	$228,453,278

The accompanying notes are an integral part of these statements.

Hewlett Packard Enterprise Puerto Rico Tax Savings Capital Accumulation Plan

Statement of Changes in Net Assets Available for Benefits
For the Year Ended December 31, 2025

Additions to Net Assets Available for Benefits	
Attributed to:	
Contributions -	
Employer	$ 2,188,218
Participants	5,227,036
Rollovers	2,281,153
	9,696,407
Dividend and interest income	14,463,036
Net appreciation in fair value of investments	23,046,005
Total additions	47,205,448
Deductions from Net Assets Available for Benefits	
Attributed to:	
Withdrawals and benefit payments	14,886,920
Administrative expenses	11,478
Total deductions	14,898,398
Net Increase in Net Assets Available for Benefits	32,307,050
Net Assets Available for Benefits, beginning of year	228,453,278
Net Assets Available for Benefits, end of year	$260,760,328

The accompanying notes are an integral part of this statement.

Hewlett Packard Enterprise Puerto Rico Tax Savings Capital Accumulation Plan

Notes to Financial Statements
December 31, 2025

1. Plan Description

The following description of the Hewlett Packard Enterprise Puerto Rico Tax Savings Capital Accumulation Plan (the Plan) is provided for general information purposes only. Participants should refer to the Plan document for more complete information.

The Plan Sponsor is Hewlett Packard Enterprise IV LLC, and the Plan Administrator is the Benefits Board Committee established by Hewlett Packard Enterprise IV LLC. The Trustee is Banco Popular de Puerto Rico, and Fidelity Management Trust Company serves as the investment manager and recordkeeper of the Plan.

General

The Plan is a Puerto Rico only qualified defined contribution plan covering substantially all employees of Hewlett Packard Enterprise IV LLC, Hewlett Packard Enterprise III LLC, Hewlett Packard Enterprise V LLC, Hewlett Packard Enterprise I LLC, Hewlett Packard Enterprise CRL, Hewlett Packard Enterprise Holdings CRL, and Hewlett-Packard Puerto Rico B.V. LLC (the Companies). Refer to Note 6 – Subsequent Events – for additional participating employer.

The Plan was originally established effective March 10, 1992. The Plan is intended to provide retirement benefits to Puerto Rico employees and to encourage and assist those employees in adopting a regular savings program by means of payroll deductions through a plan that qualifies under Sections 1081.01(a) and (d) of the Puerto Rico Internal Revenue Code of 2011 (PR Code), as amended. The Plan is subject to the provisions of Title I of the Employees' Retirement Income Security Act of 1974 (ERISA), as amended. The Plan is funded through a Puerto Rico situs trust exempt from Puerto Rico taxation under Section 1081.01(a) of the PR Code, and from federal income tax under Section 501(a) of the United States Internal Revenue Code of 1986, as amended, in conformity with Section 1022(i)(1) of ERISA.

The Plan's investments are held in trust by Banco Popular de Puerto Rico, a qualified institution under 29 CFR 2520.103-5. Banco Popular certifies the investment information as complete and accurate as of December 31, 2025 and 2024, and for the year ended December 31, 2025, in accordance with Department of Labor requirements. Based on these certifications, and as permitted under ERISA Section 103(a)(3)(C), the audit does not include procedures over the certified investment information. Refer to Notes 2 and 3 – Summary of Significant Accounting Policies and Fair Value Measurements, respectively – for additional information.

Plan Amendments and Restatements

The Plan has been amended and restated several times.

The Plan document in effect as of December 31, 2024, was restated effective January 1, 2014 (2014 Plan Restatement) and subsequently amended twelve times. Following a summary of significant amendments made to the 2014 Plan Restatement regarding various corporate and business transactions, which impacted the participating employers in the Plan and the Plan sponsorship:

On August 1, 2015, in connection with the corporate separation of Hewlett-Packard Company into HP Inc. (HPI) and Hewlett Packard Enterprise Company (HPE), the Plan's name was changed to the Hewlett Packard Enterprise Puerto Rico Tax Savings Capital Accumulation Plan. and the accounts of employees who moved to HPI were transferred to the HP Inc. Puerto Rico Tax Savings Capital Accumulation Plan.

On August 10, 2016, the Plan was adopted by Hewlett Packard Caribe y Andina BV LLC, an HPE affiliate which commenced operations in Puerto Rico on July 25, 2016. Further, on October 31, 2016, Hewlett Packard Technology Center, Inc. ceased to be a participating employer in the Plan due to the closure of its operations and the transfer of its employees to Hewlett Packard Caribe BV LLC.

As a result of the sale of HPE's enterprise services business, Enterprise Services Caribe LLC became a temporary participating employer in the Plan from December 1, 2016 until March 31, 2017, when its business was spun off and merged with Computer Sciences Corporation (later DXC Technologies). Effective on April 1, 2017, Enterprise Services Caribe LLC ceased to be a participating employer in the Plan.

In connection the sale of HPE's software business, Entco Caribe B.V. LLC and Entco Puerto Rico B.V. LLC became temporary participating employers in the Plan from June 1, 2017 until August 31, 2017, when its business was spun off and merged with Micro Focus International plc. Effective September 1, 2017, Entco Caribe B.V. LLC and Entco Puerto Rico B.V. LLC ceased participation in the Plan, and the Plan's assets and liabilities attributable to their employees, including notes receivable, were transferred to the Entco Puerto Rico Tax Savings Capital Accumulation Plan, a profit-sharing plan containing a cash or deferred arrangement intended to be qualified only under the PR Code.

On February 19, 2018, the Plan was adopted by Hewlett Packard Enterprise CRL, a new HPE entity which received certain employees transferred from Hewlett Packard Caribe BV LLC.

On April 1, 2019, the Plan was adopted by Hewlett Packard Enterprise Holdings CRL and certain employees of Hewlett Packard Enterprise CRL were transferred to Hewlett Packard Enterprise Holdings CRL. Later that year, on November 1, 2019, Hewlett Packard Caribbean Manufacturing BV LLC ceased to be a participating employer in the Plan because of the sale of its Puerto Rico operations to Hewlett Packard Caribe BV LLC .

In 2023, the HPE entities in Puerto Rico underwent a significant corporate reorganization to comply with changes to the federal tax regime. As part of this reorganization, effective April 1, 2023: (i) Hewlett Packard Caribe BV LLC sold its onshore manufacturing business and onshore business activities to Hewlett Packard Enterprise II BV LLC and Hewlett Packard Enterprise I LLC, respectively, (ii) Hewlett Packard Enterprise II BV LLC and Hewlett Packard Enterprise I LLC became participating employers in the Plan, and (iii) the sponsorship of the Plan was transferred from Hewlett Packard Caribe BV LLC to Hewlett Packard Enterprise II BV LLC.

As the reorganization continued into 2024, effective March 1, 2024: (i) Hewlett Packard Enterprise II BV LLC sold its manufacturing business to Hewlett Packard Enterprise IV LLC; (ii) Hewlett Packard Caribe y Andina BV LLC sold its manufacturing business to Hewlett Packard Enterprise III LLC; iii) Hewlett Packard Caribe BV LLC sold its business to Hewlett Packard Enterprise V LLC; (iv) Hewlett Packard Enterprise III LLC, Hewlett Packard Enterprise IV LLC, and Hewlett Packard Enterprise V LLC became participating employers in the Plan; (v) the sponsorship of the Plan was transferred from Hewlett Packard Enterprise II BV LLC to Hewlett Packard Enterprise IV LLC; and (vi) Hewlett Packard Enterprise II BV LLC, Hewlett Packard Caribe y Andina BV LLC, and Hewlett Packard Caribe BV LLC ceased to be participating employers in the Plan.

The Plan document in effect as of December 31, 2025, and for the year then ended, was the Plan as amended and restated effective January 1, 2025 (2025 Plan Restatement). The 2025 Plan Restatement consolidated all amendments adopted since the 2014 Restatement, incorporated provisions required under the SECURE 2.0 Act, and reflected administrative and operational updates. Refer to Note 4 – Tax Status – for additional information on the Plan's tax-qualified status, and to Note 6 – Subsequent Events – for subsequent amendments to the 2025 Plan Restatement.

Eligibility

An employee becomes a member of the Plan as soon as they meet the definition of Eligible Employee. Participation is automatic and effective as soon as administratively practicable after meeting the eligibility requirements, unless the employee formally elects not to participate.

Contributions

Participants of the Plan may authorize the Companies to make contributions to the Plan through payroll deductions from their monthly compensation, prior to amounts withheld for insurance or other welfare benefits, if any. Participant pre-tax contributions may not exceed $15,000 per year, the limit established under Section 1081.01(d) of the PR Code. With the approval of the Plan's Administrator, participants may also contribute amounts representing rollovers from other qualified defined benefit or contribution plans.

The Companies match participants' contributions based on predetermined matching contribution percentages, as follows:

Participant's Payroll Deduction Percentage	Matching Percentage Contribution
From 1% to 3%	100%
From 4% to 5%	50%

Employer matching contributions are calculated per payroll period and only apply to salary reduction contributions. Catch-up and rollover contributions are not eligible for matching.

Participants' Accounts

Individual accounts are maintained for each Plan's participant. Each participant's account is credited with the participant's applicable pre-tax, and/or rollover contributions and allocations of: (a) the Companies' matching and discretionary contributions, and (b) Plan earnings. Allocations are based on participant's share of the Plan's income (losses) and any related expenses.

The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account. The change in the value of the Plan's invested assets is posted to the participant's account on a daily basis.

Investment Alternatives

Upon enrollment in the Plan, a participant may direct its contributions, along with the Companies' matching contribution, in: (a) entirely in any one of the available funds; or (b) divided between any two or more of such investment funds in multiples of 5%. Funds are managed by Fidelity Management Trust Company.

Vesting

Participants' contributions are always vested and shall not be subject to forfeiture for any reason. A participant who first becomes an employee before October 1, 2012, is fully vested on the matching contributions. A participant who first becomes an employee on or after October 1, 2012, will be 100% vested on the matching contributions upon the earlier of: (1) three years of service; (2) attainment of age 65; (3) death; or (4) becoming eligible for disability benefits under the Companies' long term disability benefits program.

Payment of Benefits

Payment of benefits will be made as soon as administratively practicable after termination of employment, and no later than sixty days after the end of the Plan year in which the participant attains age 65 or, if later, the date of employment terminates.

Distribution of participant accounts may be made as a single lump-sum cash payment. Upon early retirement (age 55 with 15 years of service), a participant may elect to receive annual cash installments instead of a lump sum. In the case of termination due to death or disability, or upon reaching early retirement age, the entire account balance is paid to the person or persons legally entitled thereto, regardless of years of service.

If, at the time of distribution, the value of a participant's vested benefit is one thousand dollars ($1,000) or less, the Plan administrator will immediately distribute such benefit without the participant's consent. However, a participant's vested benefit may not be paid without written consent if the value exceeds one thousand dollars ($1,000).

Notes Receivable from Participants

Notes receivable from participants should not exceed fifty percent (50%) of the participant's vested account balance. In no event will the amount of any loan granted to a participant exceed fifty thousand dollars ($50,000) or be less than one thousand dollars ($1,000).

Loans to participants under the Plan may be repaid within five years of the date on which the loan is made, except loans used to acquire a principal residence of the participant which may be repaid within fifteen years. The notes receivable from a participant are secured by the balance in the participant's account and will bear interest at one percent (1%) above the prime rate (as published by Reuters). Principal and interest are repaid to the Plan ratably through payroll deductions or manual loan repayments.

Plan Termination

Although it has not expressed any intent to do so, the Companies have the right under the Plan provisions to discontinue their contributions at any time and to terminate the Plan subject to the provisions of ERISA. In the event of Plan termination, participants shall be fully vested and nonforfeitable in their accrued benefits as of the date of termination or discontinuance.

2. Summary of Significant Accounting Policies:

Basis of Accounting

The accompanying financial statements of the Plan have been prepared under the accrual basis of accounting.

Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States requires management to make estimates and assumptions that affect the reported amounts of assets and changes therein, and disclosure of contingent assets and liabilities. Actual results could differ from those estimates.

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 reasonable possible that changes in the values of investment securities will occur in the near term, and those changes could materially affect the amounts reported in the statement of net assets available for benefits.

Investments

The Plan's investments are stated at fair market 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. Quoted market prices are used to value investments, which represent the net asset value of units held by the Plan at year-end. Refer to Note 3 – Fair Value Measurements – for more information.

Purchases and sales of investment units are reflected on a trade date basis. Income is recorded as earned on an accrual basis.

In accordance with the policy of stating investments at fair market value, net unrealized appreciation (depreciation) of investments for the year is reflected in the statement of changes in net assets available for benefits. Net appreciation (depreciation) includes the Plan's gains and losses on investments bought and sold as well as those held during the year.

Management fees and certain operating expenses charged to the Plan for investments are deducted from income earned daily and are not separately reflected. Consequently, these management fees and operating expenses are reflected as a reduction in the investment return for such investments.

Notes Receivable from Participants

Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Interest income is recorded on an accrual basis. Related fees are charged directly to the borrowing participant's account and are included in administrative expenses when incurred. As of December 31, 2025 and 2024, no allowance for credit losses has been recorded.

If a participant does not make repayments and the Plan Administrator considers the participant to be in default, the balance is reduced and the delinquent participant note receivable is recorded as a benefit payment based on the terms of the Plan document. Notes are considered in default if any scheduled payment remains unpaid beyond the last day of the calendar quarter following the calendar quarter in which the participant missed the scheduled payment.

Outstanding notes receivable on December 31, 2025 have final maturities ranging from January 2026 to January 2031 for general-purpose loans, and to September 2040 for principal residence acquisition loans, and carry interest rates ranging from 4.25% to 9.50%.

Contributions

Participant contributions and employer matching contributions are recorded in the period in which the Companies make the payroll deductions from the Participant's compensation. Discretionary contributions are posted to Participant accounts annually.

Payment of Benefits

Benefits payments to participants are recorded upon distributions.

Administrative Expenses

Certain expenses for the administration of the Plan were paid by the Companies and amounted to approximately $102,800 during the Plan year ended December 31, 2025.

3. Fair Value Measurements:

The Plan reports its investments at fair value in accordance with Accounting Standards Codification (ASC) 820 – Fair Value Measurement.

Fair value is defined as the price that would be received to sell an asset or paid to transfer a liability (an exit price) in an orderly transaction between market participants at the measurement date. Valuation techniques used by the Plan are based on observable and unobservable inputs.

Observable inputs reflect market data obtained from independent sources, while unobservable inputs reflect the Plan's own assumptions about market participant assumptions based on the best information available.

ASC 820 establishes a fair value hierarchy that prioritizes the inputs used to measure fair value. Assets and liabilities are classified in the fair value hierarchy based on the lowest level of input that is significant to the fair value measurement:

- Level 1 – Quoted prices (unadjusted) in active markets for identical assets or liabilities.
- Level 2 – Quoted prices in active markets for similar assets or liabilities, quoted prices for identical or similar assets or liabilities in markets that are not active, and model-based valuation techniques for which all significant assumptions are observable in the market or can be corroborated by observable market data.
- Level 3 – Unobservable inputs for the asset or liability.

The fair value hierarchy gives the highest priority to observable inputs and the lowest priority to unobservable inputs.

The following is a description of the valuation methodologies used for assets measured at fair value:

- Mutual funds: Valued at quoted market prices, which represent the net asset value of shares held by the Plan at year-end. These investments are classified within Level 1 of the fair value hierarchy.
- Short-term investments: Valued at cost plus accrued interest, which approximates fair value.

The following are the major categories of assets measured at fair value on a recurring basis:

	2025			
Description	*Total*	*Level 1*	*Level 2*	*Level 3*
Mutual Funds	$235,902,523	$235,902,523	$ -	$ -
Short-term Investments	20,559,257	20,559,257	$ -	$ -
Total Investments, at fair value	$256,461,780	$256,461,780	$ -	$ -

	2024			
Description	*Total*	*Level 1*	*Level 2*	*Level 3*
Mutual Funds	$206,038,352	$206,038,352	$ -	$ -
Short-term Investments	18,871,835	18,871,835	$ -	$ -
Total Investments, at fair value	$224,910,187	$224,910,187	$ -	$ -

4. Tax Status:

On September 25, 2025, the Puerto Rico Treasury Department issued the most recent favorable determination to the Plan, wherein it held that the Plan, as amended and restated effective January 1, 2025 (2025 Plan Restatement) meets the requirements of Sections 1081.01(a) and (d) of the Puerto Rico Internal Revenue Code of 2011, as amended, and that the trust forming part of the Plan is entitled to exemption from Puerto Rico income taxes. Pursuant to ERISA Section 1022(i)(1), the Puerto Rico situs trust funding the Plan is intended to be exempt from federal income tax under Section 501(a) of the United States Internal Revenue Code. Based on the best knowledge and belief, the Plan Administrator understands that the Plan, as currently designed and operated, complies with the applicable requirements of the Puerto Rico Internal Revenue Code, ERISA, and the regulations issued thereunder. The Plan's legal counsel has represented that the Plan complies in form with Sections 1081.01(a) and (d) of the Puerto Rico Internal Revenue Code.

Generally accepted accounting principles in the United States of America require the Plan to evaluate uncertain tax positions. The financial statement effects of a tax position are recognized when the position is more likely than not, based on the technical merits, to be sustained upon examination by the tax authorities. The Plan has concluded that, as of December 31, 2025 and 2024, there were no uncertain tax positions taken or expected to be taken. The Plan is subject to routine audits by taxing jurisdictions and regulators; however, there are currently no audits for any tax periods in progress.

5. Related Party and Party-in-Interest Transactions:

The Plan engages in certain transactions involving Fidelity Management Trust Company and affiliates of Fidelity Investments, The Vanguard Group, Inc., and Banco Popular de Puerto Rico, which are, or have at certain times during the audited period been, parties-in-interest under the provisions of ERISA. The Plan invests in shares of mutual funds, fixed income funds, and money market funds managed by Fidelity Management Trust Company, The Vanguard Group, Inc., and Banco Popular de Puerto Rico. Fidelity Management Trust Company also serves as the investment manager and recordkeeper of the Plan's investments and participants' accounts, and Banco Popular de Puerto Rico serves as the Plan's trustee; therefore, these transactions qualify as party-in-interest transactions. The Vanguard Group, Inc. owns more than ten percent (10%) of Hewlett Packard Enterprise Company, the parent entity of the Companies participating in the Plan. Fees paid by the Plan for investment management and recordkeeping services are reflected as deductions from net assets available for benefits.

On December 31, 2025 and 2024, the Plan held $22,545,305 and $19,931,959, respectively, in fixed income and money market funds managed by The Vanguard Group, Inc. In addition, the Plan held shares of mutual funds managed by Fidelity Management Trust Company totaling $181,282,033 and $157,042,897 as of December 31, 2025 and 2024, respectively. As of December 31, 2025 and 2024, the Plan also maintained a demand deposit account with Banco Popular de Puerto Rico with balances of $22,500 and $381, respectively

All such transactions were conducted in the ordinary course of business and in accordance with the Plan's governing documents and applicable fiduciary standards. No prohibited transactions were identified during the reporting period. These transactions are exempt from the prohibited transaction rules under ERISA.

6. Subsequent Events

The Plan Administrator has evaluated subsequent events through September 27, 2026, the date the Plan's financial statements were available to be issued, as described below:

On June 1, 2026, Hewlett Packard Enterprise VI LLC (HPE VI), a limited liability company organized under the laws of the Commonwealth of Puerto Rico, became a participating employer in the Plan. As part of the same transaction, HPE VI acquired the offshore sales and trading service businesses of Hewlett Packard Puerto Rico B.V. LLC, and the employees associated with those operations were transferred to HPE VI. In connection with this transaction, the Benefits Board Committee of Hewlett Packard Enterprise IV LLC, the Plan Sponsor, approved the adoption of the Plan by HPE VI and executed the first amendment to the 2025 Plan Restatement, effective June 1, 2026, to reflect the addition of HPE VI and the continuation of the multi-year corporate restructuring that began in 2023. Separately, on June 1, 2026, the Board of Managers of HPE VI unanimously consented to the adoption of the Plan for the benefit of its Puerto Rico employees, including the transferred employees, in accordance with the terms of the Plan.

The Company has represented that it intends to timely submit the first amendment made to the 2025 Plan Restatement with the Puerto Rico Treasury Department to secure an updated favorable determination letter for the Plan regarding such plan's continued tax qualification under Sections 1081.01(a) and (d) of the PR Code in conformity with Puerto Rico Treasury Department Tax Policy Circular Letter No. 16-08 of December 23, 2016.

These subsequent events do not affect the financial position of the Plan as of December 31, 2025, but are disclosed to provide users of the financial statements with relevant information regarding changes in the Plan's participating employers.

Schedule

Hewlett Packard Enterprise Puerto Rico Tax Savings Capital Accumulation Plan

EIN: 66-1046467
PN: 002

Schedule of Assets Held for Investment Purposes
Schedule H (Form 5500) - Item 4(i)

December 31, 2025

(a)	(b) Identity of issue, Borrower, Lessor, or Similar Party	(c) Description of Investment	Number of Units	(e) Current Value
Mutal Funds:				
*	Fidelity Contrafund - Class K	Large growth	2,356,309	$ 57,517,511
*	Fidelity Low Priced Stock Fund - Class K	Mid-Cap value	245,248	10,094,398
*	Fidelity Freedom Income Fund - Class K	Large blend	79,737	897,836
*	Fidelity Freedom 2010 Fund - Class K	Large blend	26,050	384,500
*	Fidelity Freedom 2015 Fund - Class K	Large blend	35,576	430,473
*	Fidelity Freedom 2020 Fund - Class K	Large blend	266,134	4,079,829
*	Fidelity Freedom 2025 Fund - Class K	Large blend	495,112	7,362,311
*	Fidelity Freedom 2030 Fund - Class K	Large blend	776,281	15,160,775
*	Fidelity Freedom 2035 Fund - Class K	Large blend	700,973	12,421,241
*	Fidelity Freedom 2040 Fund - Class K	Large blend	1,072,135	14,345,167
*	Fidelity Freedom 2045 Fund - Class K	Large blend	582,626	9,263,757
*	Fidelity Freedom 2050 Fund - Class K	Large blend	504,269	8,148,995
*	Fidelity Freedom 2055 Fund - Class K	Large blend	317,293	5,955,597
*	Fidelity Freedom 2060 Fund - Class K	Large blend	61,523	1,060,659
*	Fidelity Freedom 2065 Fund - Class K	Large blend	27,405	431,082
*	Fidelity Freedom 2070 Fund - Class K	Large blend	682	8,403
*	Fidelity Extended Market Index Fund - Institutional Premium Class	Mid-Cap blended	50,486	5,082,460
*	Fidelity 500 Index Fund	Large blend	120,465	28,637,039
	PIMCO Total Return Fund Institutional Class	Bond	787,722	6,979,215
	Touchstone Mid Cap Growth Fund Institutional Class	Mid-Cap growth	249,271	10,302,386
	Harbor Capital Appreciation Fund Institutional Class	Large growth	168,859	19,688,910
	NYLI/E US EQ YLD I	Large growth	139,247	3,145,585
	Victory RS Partners Fund Class Y	Small blend	79,075	2,410,207
	Harding Loevner International Equity Portfolio Institutional Class	Large growth	305,176	8,288,574
	American Beacon Stephens Small Cap Growth Fund Institutional Class	Large growth	117,302	1,797,065
*	Vanguard Short Term Bond Index Fund Admiral Shares	Short term bond	194,250	2,008,548
				235,902,523
Short-term Investments:				
*	Vanguard Federal Money Market Fund	Money market	20,536,757	20,536,757
*	Banco Popular de Puerto Rico	Demand deposit		22,500
				20,559,257
	Total investments, at fair value			$ 256,461,780
*	Notes Receivable from Participants	Interest rates ranging from 4.25% to 9.50% and maturity dates through November 2040		$ 4,298,548 **

*Party-in-interest to the Plan.
**Notes receivable from participants are valued at their outstanding principal amount, plus accrued but unpaid interest.