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
CAMBRIDGE CONSULTANTS, INC. 401(K) PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 03/31/2016

2a Plan sponsor's name (employer, if for a single-employer plan)
Mailing address (include room, apt., suite no. and street, or P.O. Box)
City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions)
CAMBRIDGE CONSULTANTS, INC.

2 DRYDOCK AVENUE, SUITE 1210
BOSTON, MA 02110

2b Employer Identification Number (EIN)
20-1180979

2c Plan Sponsor's telephone number
617-532-4700

2d Business code (see instructions)
541600

Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.

Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including accompanying schedules, statements and attachments, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.

SIGN HERE	Filed with authorized/valid electronic signature.	10/09/2026	KAREN GRAHAM
	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**	127
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)**	41
a(2)	Total number of active participants at the end of the plan year	**6a(2)**	52
b	Retired or separated participants receiving benefits	**6b**	0
c	Other retired or separated participants entitled to future benefits	**6c**	80
d	Subtotal. Add lines **6a(2)**, **6b**, and **6c**.	**6d**	132
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	0
f	Total. Add lines **6d** and **6e**.	**6f**	132
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)**	127
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)**	100
h	Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.	**6h**	4
7	Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

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

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

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
CAMBRIDGE CONSULTANTS, INC. 401(K) PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
CAMBRIDGE CONSULTANTS, INC.

D Employer Identification Number (EIN)
20-1180979

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).. . . . . ☐ Yes ☒ No

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

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

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

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

EMPOWER ADVISORY GROUP, LLC

8515 EAST ORCHARD ROAD
GREENWOOD VILLAGE, CO 80111

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28	INVESTMENT MGMT	59433	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

COMMONWEALTH EQUITY SERVICES LLC DB

275 WYMAN ST STE 400
WALTHAM MA
WALTHAM, MA 02451

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27	INVESTMENT ADVISOR	32277	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

EMPOWER ANNUITY INSURANCE COMPANY O

8515 EAST ORCHARD ROAD
GREENWOOD VILLAGE, CO 80111

(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?
64	RECORDKEEPER	5769	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [X] No [ ]

Part I Service Provider Information (continued)

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

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

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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(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
CAMBRIDGE CONSULTANTS, INC. 401(K) PLAN

B Three-digit plan number (PN) ▶ 001

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
CAMBRIDGE CONSULTANTS, INC.

D Employer Identification Number (EIN)
20-1180979

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:	GREAT GRAY TRUST AMERICAN FUNDS 203		
b Name of sponsor of entity listed in (a):	GREAT GRAY		
c EIN-PN 38-4126263-567	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	584274
a Name of MTIA, CCT, PSA, or 103-12 IE:	GREAT GRAY TRUST AMERICAN FUNDS 204		
b Name of sponsor of entity listed in (a):	GREAT GRAY		
c EIN-PN 38-4126265-569	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	352026
a Name of MTIA, CCT, PSA, or 103-12 IE:	GREAT GRAY TRUST AMERICAN FUNDS 205		
b Name of sponsor of entity listed in (a):	GREAT GRAY		
c EIN-PN 38-4126267-571	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	836630
a Name of MTIA, CCT, PSA, or 103-12 IE:	PUTNAM STABLE VALUE FUND		
b Name of sponsor of entity listed in (a):	PUTNAM INVESTMENTS		
c EIN-PN 04-3159710-202	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	226285
a Name of MTIA, CCT, PSA, or 103-12 IE:	GREAT GRAY TRUST AMERICAN FUNDS 205		
b Name of sponsor of entity listed in (a):	GREAT GRAY		
c EIN-PN 38-4126266-570	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	983472
a Name of MTIA, CCT, PSA, or 103-12 IE:	GREAT GRAY TRUST AMERICAN FUNDS 201		
b Name of sponsor of entity listed in (a):	GREAT GRAY		
c EIN-PN 38-4126259-563	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	1256940
a Name of MTIA, CCT, PSA, or 103-12 IE:	GREAT GRAY TRUST AMERICAN FUNDS 202		
b Name of sponsor of entity listed in (a):	GREAT GRAY		
c EIN-PN 38-4126260-564	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	39824

a Name of MTIA, CCT, PSA, or 103-12 IE: GREAT GRAY TRUST AMERICAN FUNDS 202

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

c EIN-PN 38-4126261-565	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 756551

a Name of MTIA, CCT, PSA, or 103-12 IE: GREAT GRAY TRUST AMERICAN FUNDS 206

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

c EIN-PN 38-7275308-777	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 63030

a Name of MTIA, CCT, PSA, or 103-12 IE: GREAT GRAY TRUST AMERICAN FUNDS 203

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

c EIN-PN 38-4126262-566	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 217049

a Name of MTIA, CCT, PSA, or 103-12 IE: GREAT GRAY TRUST AMERICAN FUNDS 204

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

c EIN-PN 38-4126264-568	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 790507

a Name of MTIA, CCT, PSA, or 103-12 IE: GREAT GRAY TRUST AMERICAN FUNDS 206

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

c EIN-PN 38-4126268-572	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 156274

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

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
CAMBRIDGE CONSULTANTS, INC. 401(K) PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
CAMBRIDGE CONSULTANTS, INC.

D Employer Identification Number (EIN)
20-1180979

Part I Asset and Liability Statement

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

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a	0	0
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	0	0
(2) Participant contributions	1b(2)	0	0
(3) Other	1b(3)	0	0
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	0	0
(2) U.S. Government securities	1c(2)	0	0
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)	0	0
(B) All other	1c(3)(B)	0	0
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)	0	0
(B) Common	1c(4)(B)	0	0
(5) Partnership/joint venture interests	1c(5)	0	0
(6) Real estate (other than employer real property)	1c(6)	0	0
(7) Loans (other than to participants)	1c(7)	0	0
(8) Participant loans	1c(8)	21276	0
(9) Value of interest in common/collective trusts	1c(9)	6346436	6262863
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)	0	0
(12) Value of interest in 103-12 investment entities	1c(12)	0	0
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	10161361	11028510
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)	0	0

		(a) Beginning of Year	(b) End of Year
1d Employer-related investments:			
(1) Employer securities	1d(1)	0	0
(2) Employer real property	1d(2)	0	0
1e Buildings and other property used in plan operation	1e	0	0
1f Total assets (add all amounts in lines 1a through 1e)	1f	16529073	17291373
Liabilities			
1g Benefit claims payable	1g	0	0
1h Operating payables	1h		
1i Acquisition indebtedness	1i	0	0
1j Other liabilities	1j	0	0
1k Total liabilities (add all amounts in lines 1g through1j)	1k	0	0
Net Assets			
1l Net assets (subtract line 1k from line 1f)	1l	16529073	17291373

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)	96083	
(B) Participants	2a(1)(B)	403161	
(C) Others (including rollovers)	2a(1)(C)	0	
(2) Noncash contributions	2a(2)	0	
(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		499244
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	0	
(B) U.S. Government securities	2b(1)(B)	0	
(C) Corporate debt instruments	2b(1)(C)	0	
(D) Loans (other than to participants)	2b(1)(D)	0	
(E) Participant loans	2b(1)(E)	329	
(F) Other	2b(1)(F)	0	
(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		329
(2) Dividends: **(A)** Preferred stock	2b(2)(A)	0	
(B) Common stock	2b(2)(B)	0	
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	635078	
(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		635078
(3) Rents	2b(3)		0
(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)	0	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	0	
(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)	0	
(B) Other	2b(5)(B)	0	
(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)		836343
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		0
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		0
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		0
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		916315
c Other income	2c		32277
d Total income. Add all **income** amounts in column (b) and enter total	2d		2919586
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	2059807	
(2) To insurance carriers for the provision of benefits	2e(2)	0	
(3) Other	2e(3)	0	
(4) Total benefit payments. Add lines **2e(1)** through **(3)**	2e(4)		2059807
f Corrective distributions (see instructions)	2f		0
g Certain deemed distributions of participant loans (see instructions)	2g		0
h Interest expense	2h		0
i Administrative expenses:			
(1) Salaries and allowances	2i(1)	0	
(2) Contract administrator fees	2i(2)	0	
(3) Recordkeeping fees	2i(3)	5769	
(4) IQPA audit fees	2i(4)	0	
(5) Investment advisory and investment management fees	2i(5)	91710	
(6) Bank or trust company trustee/custodial fees	2i(6)	0	
(7) Actuarial fees	2i(7)	0	
(8) Legal fees	2i(8)	0	
(9) Valuation/appraisal fees	2i(9)	0	
(10) Other trustee fees and expenses	2i(10)	0	
(11) Other expenses	2i(11)	0	
(12) Total administrative expenses. Add lines **2i(1)** through **(11)**	2i(12)		97479
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		2157286
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		762300
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: WORTHINGTON, HUGHES & HOAR, PC **(2)** EIN: 47-2399509

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		777
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
CAMBRIDGE CONSULTANTS, INC. 401(K) PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
CAMBRIDGE CONSULTANTS, INC.

D Employer Identification Number (EIN)
20-1180979

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): 84-1455663

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 11 / 14 / 2022 (MM/DD/YYYY) and the Opinion Letter serial number Q702518A .

Cambridge Consultants, Inc. 401(k) Plan

Financial Statements
and
Supplemental Schedules

December 31, 2025 and 2024

Worthington, Hughes & Hoar, P.C.
CERTIFIED PUBLIC ACCOUNTANTS

Cambridge Consultants, Inc. 401(k) Plan

Financial Statements and Supplemental Schedules

December 31, 2025 and 2024

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The accompanying financial statements have been prepared for the purpose of filing Department of Labor Form 5500. Supplemental schedules required by Section 2520 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, other than the supplemental schedule listed above, have been omitted for the reason that they are not applicable.

Worthington,
Hughes & Hoar, P.C.
CERTIFIED PUBLIC ACCOUNTANTS

WHH
400 West Cummings Park
Suite 3000
Woburn, MA 01801
Phone: (781) 305-3534
Fax: (781) 305-3668
www.wh2cpas.com

Independent Auditor's Report

To the Administrative Committee of the
Cambridge Consultants, Inc. 401(k) Plan

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

We have performed audits of the accompanying financial statements of Cambridge Consultants, Inc. 401(k) 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 statements of changes in net assets available for benefits for the years then ended, 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 Cambridge Consultants, Inc. 401(k) Plan's financial statements performed in accordance with ERISA Section 103(a)(3)(C) pursuant to 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. As permitted by ERISA Section 103(a)(3)(C), our audits need not extend to any statements or information related to assets held for investment of the plan (investment information) by a bank or similar institution or insurance carrier that is regulated, supervised, and subject to periodic examination by a state or federal agency, provided that the statements or information regarding assets so held are prepared and certified to by the bank or similar institution or insurance carrier in accordance with 29 CFR 2520.103-5 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA (qualified institution).

Management has obtained certifications from a qualified institution as of and for the years ended December 31, 2025 and 2024, stating that the certified investment information, as described in Note 3 to the financial statements, is complete and accurate.

Opinion

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

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

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of Cambridge Consultants, Inc. 401(k) 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 Cambridge Consultants, Inc. 401(k) Plan's ability to continue as a going concern for one year after the date the financial statements are available to be issued.

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

Auditor's Responsibilities for the Audit of the Financial Statements

Except as described in the Scope and Nature of the ERISA Section 103(a)(3)(C) Audit section of our report, our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with generally accepted auditing standards 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 generally accepted auditing standards, 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 Cambridge Consultants, Inc. 401(k) 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 Cambridge Consultants, Inc. 401(k) 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 Schedules Required by ERISA

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

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

In our opinion –

- The form and content of the supplemental schedules, other than the information in the supplemental schedules that agreed to or is derived from the certified investment information, are presented, in all material respects, in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.
- The information in the supplemental schedules related to assets held by and certified to by a qualified institution agrees to or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).

Worthington, Hughes & Hoar, P.C.

Woburn, Massachusetts
September 30, 2026

Cambridge Consultants, Inc. 401(k) Plan

Statements of Net Assets Available for Benefits

December 31, 2025 and 2024

		2025	2024
Assets:			
Investments, at fair value	$	17,291,373	16,507,797
Receivables:			
Notes receivable from participants		-	21,276
Total receivables		-	21,276
Total assets		17,291,373	16,529,073
Net assets available for benefits	$	17,291,373	16,529,073

See accompanying notes to financial statements.

Cambridge Consultants, Inc. 401(k) Plan

Statements of Changes in Net Assets Available for Benefits

For the Years Ended December 31, 2025 and 2024

	2025	2024
Additions:		
Additions to net assets attributed to:		
Investment income:		
Net appreciation in fair value of investments	$ 1,752,658	1,647,620
Dividends and interest	635,078	420,876
Other income	32,277	31,120
Total investment income	2,420,013	2,099,616
Contributions:		
Employer	96,083	293,438
Participants	403,161	952,831
Participant rollovers from other plans	-	411,475
Total contributions	499,244	1,657,744
Other additions:		
Interest income on notes receivable from participants	329	2,234
Total other additions	329	2,234
Total additions to net assets	2,919,586	3,759,594
Deductions:		
Deductions from net assets attributed to:		
Benefits paid to participants	2,059,807	1,328,996
Administrative expenses	97,479	92,606
Total deductions from net assets	2,157,286	1,421,602
Net increase in net assets available for benefits	762,300	2,337,992
Net assets available for benefits, beginning of year	16,529,073	14,191,081
Net assets available for benefits, end of yea	$ 17,291,373	16,529,073

See accompanying notes to financial statements.

(1) Description of Plan

The following brief description of the Cambridge Consultants, Inc. 401(k) Plan (the "Plan") is provided for general information purposes only. Participants should refer to the Plan agreements for a more complete description of the Plan's provisions.

(a) General

The Plan is a defined contribution Plan established by Cambridge Consultants, Inc., (the "Company") under the provision of Section 401(a) of the Internal Revenue Code ("IRC"), which includes a qualified cash or deferred arrangement as described in Section 401(k) of the IRC, for the benefit of eligible employees of the Company. All employees of the Company, as defined, are eligible to participate, provided that they are at least 18 years of age and have incurred one month of service, as defined. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA").

(b) Plan Administration

The Plan is administered by several officers and employees of the Company who are appointed by the board of directors. The Plan's trustee, Empower Trust Company, LLC, is responsible for the custody and management of the Plan's assets.

(c) Contributions

Eligible participants may contribute the lesser of 100% of their eligible pretax annual compensation, as defined by the Plan, or the maximum allowed by law ($23,500 for 2025 and $23,000 for 2024). Participants may alternatively elect to make after-tax Roth 401(k) deferral contributions. Participants who have attained age 50 before the end of the Plan year are eligible to make catch-up contributions. Participants may also contribute amounts representing distributions from other qualified defined benefit or contribution Plans. Additional amounts may be contributed at the option of the Company's Board of Directors. Both employee and employer contributions are subject to certain annual limitations under the IRC. The Company currently matches 50% of a participant's section 401(k) and Roth deferrals up to the first 6% of compensation, which amounted to $96,083 and $293,438, for the years ended December 31, 2025 and 2024, respectively. The Plan Sponsor funds employer matching contributions on a basis coinciding with each payroll cycle.

Participants direct the investment of their contributions into various investment options offered by the Plan. The Plan currently offers various mutual funds, a stable value fund, and common/collective trust funds (blended target date funds) as investment options for participants. The Plan includes an auto-enrollment provision whereby all newly eligible employees are automatically enrolled in the Plan unless they affirmatively elect not to participate in the Plan. Automatically enrolled participants have their deferral rate set at 3 percent of eligible compensation and their contributions invested in a designated balanced fund until changed by the participant.

(1) **Description of Plan** (Continued)

(d) Participant Accounts

Each participant's account is credited with the participant's contributions and allocations of the Company's matching contributions, as well as allocations of Plan earnings. Participant accounts are charged with an allocation of administrative expenses. Allocations are based on participant earnings, account balances, or specific participant transactions, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

(e) Vesting

Participants are immediately vested in all participant contributions. Participants become vested in the employer matching contributions and the earnings thereon as follows:

Years of Service	Vesting %
Less than 1	0%
1	33 1/3%
2	66 2/3%
3	100%

(f) Investment Options

The assets of the Plan, both employee and employer, are allocated to the various investment options at the direction of the Participant.

(g) Notes Receivable from Participants

Participants may borrow from their accounts a minimum of $1,000 up to a maximum equal to the lesser of $50,000 or 50% of their vested account balance. Loan terms range from one to five years or up to thirty years for the purchase of a primary residence. The loans are secured by the vested balance in the participant's account and bear interest at rates that are commensurate with local prevailing rates as determined by the Plan administrator (7.75% at December 31, 2025 and 8.50% at December 31, 2024). Principal and interest are paid ratably through payroll deductions.

(h) Payment of Benefits

Upon termination of service, death, disability or retirement, a participant or the beneficiary may elect to receive a lump sum amount equal to the value of the participant's vested interest in his or her account.

(i) Unallocated Assets

Plan assets that have not been allocated to participants as of December 31, 2025 and 2024, totaled $21 and $28,255, respectively. These amounts may be used to pay plan administrative expenses and any remaining funds may be allocated to participants in accordance with the Plan agreements. Unallocated assets were used as follows during the years ended December 31, 2025 and 2024:

	2025	2024
Reduction of employer matching contributions	$ 33,886	-
Payment of plan administrative expenses	3,623	4,441
Total	$ 37,509	4,441

(2) **Summary of Significant Accounting Policies**

(a) Basis of Accounting

The accompanying financial statements of the Plan have been prepared pursuant to accounting principles generally accepted in the United States of America and in accordance with the accrual method of accounting.

Investments held by a defined-contribution Plan are required to be reported at fair value.

(b) Investment Valuation and Income Recognition

The Plan's investments are stated 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 investments in mutual funds (shares of registered investment companies) are valued at quoted market prices, which represent the net asset value of shares held by the Plan at year-end. The Plan's investments in common/collective trust funds are measured using net asset value as a practical expedient. See Note 4 for a discussion of fair value measurements.

Purchases and sales 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 (depreciation) includes the Plan's gains and losses on investments bought and sold as well as held during the year.

The incorporation of investment data in the accompanying financial statements is based solely on the certified statements provided by Empower Trust Company, LLC, the Trustee for the Plan (see Note 3).

(c) Contributions

Contributions from participants are recorded as they are withheld from the participant's wages. Contributions from the Company are recorded in the period in which the related participant contributions are due.

(d) Notes Receivable from Participants

Notes receivable from participants are reported at their unpaid principal balance plus any accrued but unpaid interest, with no allowance for credit losses, as repayments of principal and interest are received through payroll deductions and the notes are collateralized by the participants' account balances. Interest income on notes receivable from participants is recorded on the accrual basis. Related fees are charged directly to the borrowing participant's account and are included in administrative expenses when incurred. If a participant does not make loan repayments and the plan administrator considers the participant loan to be in default, the loan balance is reduced, and the delinquent participant note receivable is recorded as a benefit payment based on the terms of the Plan document.

(e) Payments of Benefits

Benefits are recorded when paid to the participants or their beneficiaries.

(f) Plan Expenses

Fees paid by Plan participants include investment advisory services, recordkeeping, loan issuances, expedited distribution processing, and similar charges.

(2) **Summary of Significant Accounting Policies** (Continued)

(f) Plan Expenses (Continued)
Investments in registered investment companies (mutual funds) are subject to sales charges (broker commission or load fees) and annual expenses (12b-1 fees). These expenses are deducted prior to the allocation of the Plan's investment earnings activity and thus are not separately identifiable as Plan expenses. Such expenses are included in the net appreciation (depreciation) in fair value of investments.

(g) Use of Estimates
The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires the Plan administrator to make estimates and assumptions that affect the reported amounts of Plan assets and liabilities and changes therein, and disclosure of contingent assets and liabilities. Accordingly, actual results could differ from those estimates.

(3) **Investments Information Prepared and Certified by the Trustee**

The Plan administrator has elected the method of annual reporting compliance permitted by 29 CFR 2520.103-8 of the Department of Labor Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, Empower Trust Company, LLC, the trustee, certified that the following data included in the accompanying financial statements and supplemental schedule are complete and accurate:

	2025	2024
Assets:		
Investments, at fair value	$ 17,291,373	16,507,797
Notes receivable from participants	-	21,276
Changes in net assets:		
Net appreciation in fair value of investments	$ 1,752,658	1,647,620
Dividends	635,078	420,876
Interest income on notes receivable from participants	329	2,234
Other income	32,277	31,120

The Plan's independent auditors did not perform auditing procedures with respect to this information, except for comparing such information to the related information included in the financial statements and supplemental schedule. Other assets not listed above, such as employer and employee contributions receivable, are not covered by the certification and are subject to audit procedures.

(4) **Fair Value Measurements**

The Plan determines the fair market values of its financial assets and liabilities, as well as non-financial assets and liabilities that are recognized or disclosed at fair value on a recurring basis, based on the fair value hierarchy established in accordance with accounting principles generally accepted in the United States of America for Fair Value Measurements. The hierarchy gives the highest priority to Level 1 measurements and the lowest priority to Level 3 measurements.

(4) **Fair Value Measurements** (Continued)

The asset 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 maximize the use of relevant observable inputs and minimize the use of unobservable inputs.

The three levels of the fair value hierarchy are described as follows:

Level 1: Inputs to the valuation methodology are quoted prices available in active markets for identical investments as of the reporting date. The Plan's Level 1 assets include interest-bearing cash and mutual funds, which are valued using the Net Asset Value (NAV) per share held by the Plan at year end. The NAV is based on the value of the underlying assets owned by the fund, minus its liabilities, and then divided by the number of shares outstanding. The NAV is quoted on an active market.

Level 2: Inputs to the valuation methodology are other than quoted prices in active markets, which are either directly or indirectly observable as of the reporting date, and fair value can be determined through the use of models or other valuation methodologies. The Plan does not have any Level 2 assets.

Level 3: Inputs to the valuation methodology are unobservable inputs in situations where there is little or no market activity for the asset or liability and the reporting entity makes estimates and assumptions related to the pricing of the asset or liability including assumptions regarding risk. The Plan does not have any Level 3 assets.

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

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

Common/collective trust funds and stable value collective trust fund: The Plan's investments in blended funds (target date funds) and a stable value fund are valued using the net asset values ("NAV") provided by the funds' trustees. The funds' trustees calculate NAV in a manner consistent with the measurement principles applicable to investment companies under accounting principles generally accepted in the United States of America. The NAV, as provided by the funds' trustees, is used as a practical expedient to estimate fair value. This practical expedient is not used when it is determined to be probable that the fund will sell the investment for an amount different than the reported NAV. Transactions (purchases and sales) may occur daily.

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 value measurement at the reporting date.

(4) **Fair Value Measurements** (Continued)

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

December 31, 2025	Level 1	Level 2	Level 3	Total
Mutual funds	$ 11,028,511	-	-	$ 11,028,511
Collective trust funds*				6,036,577
Stable value fund*				226,285
Total investments				17,291,373

December 31, 2024	Level 1	Level 2	Level 3	Total
Mutual funds	$ 10,161,361	-	-	$ 10,161,361
Collective trust funds*				6,172,345
Stable value fund*				174,091
Total investments				$ 16,507,797

*The Plan's investments in various common/collective trust funds and the Putnam Stable Value Fund, the values of which are measured at net asset value per share (or its equivalent), have not been classified in the fair value hierarchy. The fair value amounts presented in this table are intended to permit reconciliation of the fair value hierarchy to the line items presented in the statements of net assets available for benefits.

For the years ended December 31, 2025 and 2024, there were no transfers between Levels 1, 2, and 3.

The following table summarizes investments for which fair value is measured using the net asset value per share practical expedient as of December 31, 2025 and 2024, respectively. There are no participant redemption restrictions for these investments; the redemption notice period is applicable only to the Plan.

The following table sets forth additional disclosures of the Plan's investments, whose fair value is estimated using NAV per share (or its equivalent), as of December 31, 2025 and 2024. There are no participant redemption restrictions for these investments; the redemption notice period is applicable only to the Plan.

Investment	2025 Fair Value	2024 Fair Value	Redemption Frequency	Notice Period
Putnam Stable Value Fund*	$ 226,285	174,091	Daily	12 Months
Great Gray Trust American Funds:				
2015	1,256,940	1,152,966	Daily	None
2020	39,824	35,917	Daily	None
2025	756,551	654,337	Daily	None
2030	217,049	383,958	Daily	None
2035	584,274	660,877	Daily	None
2040	790,507	797,870	Daily	None
2045	352,026	312,663	Daily	None
2050	983,472	1,058,187	Daily	None
2055	836,630	706,787	Daily	None
2060	156,274	202,794	Daily	None
2065	63,030	205,989	Daily	None

(4) **Fair Value Measurements** (Continued)

**Participant Redemptions: The Fund is structured with the objective to provide participant liquidity without penalty on a daily basis. Redemption requests are generally accommodated at the Fund's NAV which is expected to be $1.00.

(5) **Benefits Allocated to Former Participants**

Net assets available for benefits at December 31, 2025, includes a total of approximately $12,657,000 of benefits allocated to the accounts of persons who have withdrawn from participating in contributions to the Plan as of that date.

(6) **Related Party and Party-in-Interest Transactions**

Certain administrative fees related to the administration of the Plan were paid by the Plan or by the Company. The Plan compensated the following parties-in-interest during 2025 and 2024:

		Compensation	
Party-in-interest	Services Provided	2025	2024
Commonwealth Equity Services, LLC	Investment advisory	$ 32,277	31,120
Empower Advisory Group, LLC	Investment management	$ 59,433	55,038
Empower Annuity Insurance Company	Recordkeeping	$ 5,769	6,448

All of these transactions are considered exempt party-in-interest transactions under ERISA.

During 2025 and 2024, the Plan sponsor did not remit certain participant contributions to the Plan in a timely manner, as defined by ERISA (see Note 7). These contributions are considered nonexempt party-in-interest transactions, which may result in an imposition of a 15 percent excise tax on the amount of the transactions. The Plan sponsor compensated the affected participants for lost interest resulting from the delays in remittance. These nonexempt transactions do not affect the tax status determination of the Plan, and the Company intends to pay all fines imposed.

(7) **Delinquent Contributions**

As required by ERISA Section 2510.3-102, the Plan sponsor is required to segregate employee contributions to the Plan from its general assets as soon as practicable but in no event more than 15 business days following the end of the month in which amounts are withheld from wages. Salary deferrals totaling $777 and $132 were not timely remitted to the Plan during the years ended December 31, 2025, and 2024 respectively. The late remittance that occurred in 2025 was corrected in 2026. The late remittance that occurred in 2024, was corrected in 2024. The Company has made additional payments to the Participants' accounts in order to compensate the participants for lost investment earnings relating to these prohibited transactions.

(8) **Plan Termination**

Although the Company has not expressed any intent to do so, it has the right under the Plan to discontinue contributions at any time and to terminate the Plan subject to the provisions of ERISA. In 2023 and 2024, the Company reduced its force by more than 20% each year resulting in a partial plan termination; participants affected by the partial plan termination were provided 100% vesting in accordance with ERISA.

(9) **Tax Status**

The Internal Revenue Service has determined and informed the sponsoring organization of this prototype Plan, by a letter dated November 14, 2022, that the Plan and related trust are designed in accordance with applicable sections of the IRC. Although the Plan has been amended since submitting the request for the latest determination letter, the Company and the Plan's tax counsel believe that the Plan is designed, and is currently being operated, in compliance with the applicable requirements of the IRC and, therefore, believe that the Plan is qualified, and the related trust is tax exempt.

Accounting principles generally accepted in the United States of America require Plan management to evaluate tax positions taken by the Plan and recognize a tax liability if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the Internal Revenue Service. The Plan Administrator has analyzed the tax positions taken by the Plan and has concluded as of December 31, 2025, there are no uncertain tax positions taken or expected to be taken. The Plan is subject to routine audits by tax authorities; however, there are currently no audits for any tax periods in progress. The Plan Administrator believes the Plan is no longer subject to income tax examinations for years prior to 2022.

(10) **Risks and Uncertainties**

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

(11) **Subsequent Events**

The Plan administrator and sponsor have evaluated subsequent events through September 30, 2026, which is the date that the Plan's financial statements were available to be issued. No material subsequent events have occurred since December 31, 2025, that required recognition or disclosure in these financial statements.

Cambridge Consultants, Inc. 401(k) Plan
EIN 20-1180979 Plan 001
Schedule H, Line 4a—Schedule of Delinquent Participant Contributions
For the Year Ended December 31, 2025

Participant Contributions Transferred Late to Plan	Total that Constitute Nonexempt Prohibited Transactions			Total Fully Corrected Under VFCP and PTE-2002-51
	Contributions Not Corrected	Contributions Corrected Outside VFCP	Contributions Pending Correction in VFCP	
Check here if Late Participant Loan Repayments are included: ☐	$777	$0	$-0-	$-0-

See accompanying notes to financial statements.

Cambridge Consultants, Inc. 401(k) Plan
EIN 20-1180979 Plan 001
Schedule H, Line 4i—Schedule of Assets (Held at End of Year)
December 31, 2025

(a) Identity of party involved*	(b) Identity of issue, borrower, lessor or similar party	(c) Description of investment, including maturity date, rate of interest, collateral, par, or maturity value	Units	(d) Cost**	(e)	Current value
	Great Gray Trust American Funds 2015 I	Common/Collective Trust	85,742.956	n/a	$	1,256,940
	Great Gray Trust American Funds 2020 I	Common/Collective Trust	2,610.519	n/a		39,824
	Great Gray Trust American Funds 2025 I	Common/Collective Trust	47,875.070	n/a		756,551
	Great Gray Trust American Funds 2030 I	Common/Collective Trust	13,081.079	n/a		217,049
	Great Gray Trust American Funds 2035 I	Common/Collective Trust	33,373.548	n/a		584,274
	Great Gray Trust American Funds 2040 I	Common/Collective Trust	41,366.996	n/a		790,507
	Great Gray Trust American Funds 2045 I	Common/Collective Trust	18,327.167	n/a		352,026
	Great Gray Trust American Funds 2050 I	Common/Collective Trust	50,187.643	n/a		983,472
	Great Gray Trust American Funds 2055 I	Common/Collective Trust	43,224.398	n/a		836,630
	Great Gray Trust American Funds 2060 I	Common/Collective Trust	8,060.438	n/a		156,274
	Great Gray Trust American Funds 2065 I	Common/Collective Trust	4,021.066	n/a		63,030
	American Funds Europacific Gr R6	Registered Investment Company	8,080.680	n/a		489,528
	American Funds Income Fund of America R6	Registered Investment Company	13,515.999	n/a		353,038
	American Funds New World Fund - R6	Registered Investment Company	6,338.900	n/a		590,595
	Blackrock Global Allocation K	Registered Investment Company	6,152.394	n/a		125,386
	Blackrock Inflation Protected Bond K	Registered Investment Company	9,743.559	n/a		94,220
	BNY Mellon Dev Markets Real Est Sec Y	Registered Investment Company	19,205.027	n/a		163,627
	Invesco Energy R6	Registered Investment Company	1,135.696	n/a		36,921
	Ishares MSCI EAFE International Index K	Registered Investment Company	46,889.296	n/a		908,715
	Ishares Russell 2000 Small-Cap Index K	Registered Investment Company	12,100.988	n/a		324,186
	Ishares Russell Mid-Cap Index K	Registered Investment Company	54,075.988	n/a		837,637
	Ishares S&P 500 Index K	Registered Investment Company	4,205.785	n/a		3,348,730
	Ishares U.S. Aggregate Bond Index K	Registered Investment Company	66,456.626	n/a		610,072
	Nuveen Large Cap Responsible Equity R6	Registered Investment Company	6,042.493	n/a		171,909
	PGIM Jennison Small Company R6	Registered Investment Company	5,055.495	n/a		123,051
	PIMCO Int Bond (USD-Hedged) Inst	Registered Investment Company	3,612.282	n/a		35,870
	Pioneer Fundamental Growth K	Registered Investment Company	42,816.560	n/a		1,440,350
	Putnam High Yield R6	Registered Investment Company	21,398.878	n/a		124,328
	Putnam Income R6	Registered Investment Company	53,484.220	n/a		280,792
	Putnam Large Cap Value R6	Registered Investment Company	14,304.156	n/a		561,724
	Putnam Small Cap Value R6	Registered Investment Company	9,817.363	n/a		164,735
	Vanguard FTSE Social Index Admiral	Registered Investment Company	3,710.844	n/a		243,097
	Putnam Stable Value Fund	Common/Collective Trust	226,285.370	n/a		226,285
				Total	$	17,291,373

*Column (a) is blank as there were no parties-in-interest
**All investments are participant-directed; therefore, cost information has not been presented

See accompanying notes to financial statements.

Cambridge Consultants, Inc. 401(k) Plan
EIN 20-1180979 Plan 001
Schedule H, Line 4a—Schedule of Delinquent Participant Contributions
For the Year Ended December 31, 2025

Participant Contributions Transferred Late to Plan	Total that Constitute Nonexempt Prohibited Transactions			Total Fully Corrected Under VFCP and PTE-2002-51
	Contributions Not Corrected	Contributions Corrected Outside VFCP	Contributions Pending Correction in VFCP	
Check here if Late Participant Loan Repayments are included: ☐	$777	$0	$-0-	$-0-

See accompanying notes to financial statements.

Cambridge Consultants, Inc. 401(k) Plan
EIN 20-1180979 Plan 001
Schedule H, Line 4i—Schedule of Assets (Held at End of Year)
December 31, 2025

(a) Identity of party involved*	(b) Identity of issue, borrower, lessor or similar party	(c) Description of investment, including maturity date, rate of interest, collateral, par, or maturity value	Units	(d) Cost**	(e)	Current value
	Great Gray Trust American Funds 2015 I	Common/Collective Trust	85,742.956	n/a	$	1,256,940
	Great Gray Trust American Funds 2020 I	Common/Collective Trust	2,610.519	n/a		39,824
	Great Gray Trust American Funds 2025 I	Common/Collective Trust	47,875.070	n/a		756,551
	Great Gray Trust American Funds 2030 I	Common/Collective Trust	13,081.079	n/a		217,049
	Great Gray Trust American Funds 2035 I	Common/Collective Trust	33,373.548	n/a		584,274
	Great Gray Trust American Funds 2040 I	Common/Collective Trust	41,366.996	n/a		790,507
	Great Gray Trust American Funds 2045 I	Common/Collective Trust	18,327.167	n/a		352,026
	Great Gray Trust American Funds 2050 I	Common/Collective Trust	50,187.643	n/a		983,472
	Great Gray Trust American Funds 2055 I	Common/Collective Trust	43,224.398	n/a		836,630
	Great Gray Trust American Funds 2060 I	Common/Collective Trust	8,060.438	n/a		156,274
	Great Gray Trust American Funds 2065 I	Common/Collective Trust	4,021.066	n/a		63,030
	American Funds Europacific Gr R6	Registered Investment Company	8,080.680	n/a		489,528
	American Funds Income Fund of America R6	Registered Investment Company	13,515.999	n/a		353,038
	American Funds New World Fund - R6	Registered Investment Company	6,338.900	n/a		590,595
	Blackrock Global Allocation K	Registered Investment Company	6,152.394	n/a		125,386
	Blackrock Inflation Protected Bond K	Registered Investment Company	9,743.559	n/a		94,220
	BNY Mellon Dev Markets Real Est Sec Y	Registered Investment Company	19,205.027	n/a		163,627
	Invesco Energy R6	Registered Investment Company	1,135.696	n/a		36,921
	Ishares MSCI EAFE International Index K	Registered Investment Company	46,889.296	n/a		908,715
	Ishares Russell 2000 Small-Cap Index K	Registered Investment Company	12,100.988	n/a		324,186
	Ishares Russell Mid-Cap Index K	Registered Investment Company	54,075.988	n/a		837,637
	Ishares S&P 500 Index K	Registered Investment Company	4,205.785	n/a		3,348,730
	Ishares U.S. Aggregate Bond Index K	Registered Investment Company	66,456.626	n/a		610,072
	Nuveen Large Cap Responsible Equity R6	Registered Investment Company	6,042.493	n/a		171,909
	PGIM Jennison Small Company R6	Registered Investment Company	5,055.495	n/a		123,051
	PIMCO Int Bond (USD-Hedged) Inst	Registered Investment Company	3,612.282	n/a		35,870
	Pioneer Fundamental Growth K	Registered Investment Company	42,816.560	n/a		1,440,350
	Putnam High Yield R6	Registered Investment Company	21,398.878	n/a		124,328
	Putnam Income R6	Registered Investment Company	53,484.220	n/a		280,792
	Putnam Large Cap Value R6	Registered Investment Company	14,304.156	n/a		561,724
	Putnam Small Cap Value R6	Registered Investment Company	9,817.363	n/a		164,735
	Vanguard FTSE Social Index Admiral	Registered Investment Company	3,710.844	n/a		243,097
	Putnam Stable Value Fund	Common/Collective Trust	226,285.370	n/a		226,285
				Total	$	17,291,373

*Column (a) is blank as there were no parties-in-interest
**All investments are participant-directed; therefore, cost information has not been presented

See accompanying notes to financial statements.

SCHEDULE OF ASSETS (HELD AT END OF YEAR)

Cambridge Consultants, Inc. 401(k) Plan

01-JAN-25 to 31-DEC-25

INVESTMENT OPTION	MATURITY DATE	INTEREST RATE	COST OF ASSETS	CURRENT VALUE
1WTA15I			1,015,014.36	1,256,940.31
1WTA20I			31,274.04	39,824.00
1WTA25I			593,447.08	756,550.58
1WTA30I			161,956.27	217,049.09
1WTA35I			428,160.06	584,274.05
1WTA40I			545,470.09	790,506.76
1WTA45I			237,268.47	352,026.39
1WTA50I			695,074.07	983,472.05
1WTA55I			561,445.48	836,629.84
1WTA60I			105,414.86	156,274.17
1WTA65I			45,597.96	63,030.22
1RERGX			450,457.95	489,527.62
1RNWGX			512,107.82	590,595.29
1MKLOX			115,129.04	125,385.74
1BTMKX			780,777.57	908,714.56
1DRLYX			149,988.71	163,626.78
1IENSX			35,416.12	36,921.48
1BDBKX			279,402.37	324,185.50
1PJSQX			115,316.42	123,050.75
1PSCMX			152,607.22	164,735.34
1BRMKX			782,873.57	837,637.05
1WFSPX			2,384,728.65	3,348,729.93
1PFGKX			1,337,494.59	1,440,350.43
1PEQSX			454,658.18	561,724.17
1TISCX			161,914.88	171,908.92
1VFTAX			204,449.70	243,097.38
1RIDGX			344,103.28	353,037.92
1WFBIX			594,124.01	610,071.84
1BPLBX			93,005.76	94,220.19
1PFORX			34,321.78	35,869.94
1PHYUX			120,784.22	124,327.49
1PINHX			281,805.38	280,792.16
1PCSV25			226,264.13	226,264.13
			14,031,854.09	**17,291,352.07**
FORFEITURES			21.26	21.26

Attachment to Form 5500, Schedule H, Part 4, Item I
EIN # 20-1180979

SCHEDULE OF ASSETS (HELD AT END OF YEAR)

Cambridge Consultants, Inc. 401(k) Plan

01-JAN-25 to 31-DEC-25

INVESTMENT OPTION	MATURITY DATE	INTEREST RATE	COST OF ASSETS	CURRENT VALUE

LEGEND

INVESTMENT OPTION:

1WTA15I	Great Gray Trust American Funds 2015 I	1WTA20I	Great Gray Trust American Funds 2020 I
1WTA25I	Great Gray Trust American Funds 2025 I	1WTA30I	Great Gray Trust American Funds 2030 I
1WTA35I	Great Gray Trust American Funds 2035 I	1WTA40I	Great Gray Trust American Funds 2040 I
1WTA45I	Great Gray Trust American Funds 2045 I	1WTA50I	Great Gray Trust American Funds 2050 I
1WTA55I	Great Gray Trust American Funds 2055 I	1WTA60I	Great Gray Trust American Funds 2060 I
1WTA65I	Great Gray Trust American Funds 2065 I	1RERGX	American Funds Eupac R6
1RNWGX	American Funds New World R6	1MKLOX	BlackRock Global Allocation K
1BTMKX	iShares MSCI EAFE International Index K	1DRLYX	BNY Mellon Dev Markets Real Est Sec Y
1IENSX	Invesco Energy R6	1BDBKX	iShares Russell 2000 Small-Cap Index K
1PJSQX	PGIM Jennison Small Company R6	1PSCMX	Putnam Small Cap Value R6
1BRMKX	iShares Russell Mid-Cap Index K	1WFSPX	iShares S&P 500 Index K
1PFGKX	Victory Pioneer Fundamental Growth R6	1PEQSX	Putnam Large Cap Value R6
1TISCX	Nuveen Large Cap Responsible Equity R6	1VFTAX	Vanguard FTSE Social Index Admiral
1RIDGX	American Funds Income Fund of America R6	1WFBIX	iShares U.S. Aggregate Bond Index K
1BPLBX	BlackRock Inflation Protected Bond K	1PFORX	PIMCO Int Bond (USD-Hedged) Instl
1PHYUX	Putnam High Yield R6	1PINHX	Putnam Income R6
1PCSV25	Putnam Stable Value Fund		

COST OF ASSETS: The original cost of the assets in each investment option as of the last day of the plan year
CURRENT VALUE: The value of all assets in each investment option as of the last day of the plan year