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
MNS, LTD. PROFIT-SHARING PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 06/01/1958

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)
MNS, LTD.
ABC STORES

766 POHUKAINA STREET
HONOLULU, HI 96813-5307

2b Employer Identification Number (EIN)
71-1007574

2c Plan Sponsor's telephone number
808-591-2550

2d Business code (see instructions)
445120

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	PAUL KOSASA
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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

5	Total number of participants at the beginning of the plan year	**5**	2090
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)**	1983
a(2)	Total number of active participants at the end of the plan year	**6a(2)**	1979
b	Retired or separated participants receiving benefits	**6b**	60
c	Other retired or separated participants entitled to future benefits	**6c**	169
d	Subtotal. Add lines **6a(2)**, **6b**, and **6c**.	**6d**	2208
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	2
f	Total. Add lines **6d** and **6e**.	**6f**	2210
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)**	1775
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)**	2153
h	Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	89
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 2H 2J 2K 2R 3H

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

9a Plan funding arrangement (check all that apply)		**9b** Plan benefit arrangement (check all that apply)	
(1)	[X] 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)** [X] **A** (Insurance Information) – Number Attached 2
- **(4)** [X] **C** (Service Provider Information)
- **(5)** [ ] **D** (DFE/Participating Plan Information)
- **(6)** [ ] **G** (Financial Transaction Schedules)

Part III Form M-1 Compliance Information (to be completed by welfare benefit plans)

11a If the plan provides welfare benefits, was the plan subject to the Form M-1 filing requirements during the plan year? (See instructions and 29 CFR 2520.101-2.) ..... ☐ Yes ☐ No

If "Yes" is checked, complete lines 11b and 11c.

11b Is the plan currently in compliance with the Form M-1 filing requirements? (See instructions and 29 CFR 2520.101-2.) ..... ☐ Yes ☐ No

11c Enter the Receipt Confirmation Code for the 2025 Form M-1 annual report. If the plan was not required to file the 2025 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code_____

SCHEDULE A
(Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Insurance 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.**

▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).

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
MNS, LTD. PROFIT-SHARING PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
MNS, LTD.

D Employer Identification Number (EIN)
71-1007574

Part I **Information Concerning Insurance Contract Coverage, Fees, and Commissions** Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.

1 Coverage Information:

(a) Name of insurance carrier
AMERICAN UNITED LIFE INSURANCE COMPANY

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
35-0145825	60895	K00105	59	01/01/2025	12/31/2025

2 Insurance fee and commission information. Enter the total fees and total commissions paid. List in line 3 the agents, brokers, and other persons in descending order of the amount paid.

(a) Total amount of commissions paid	(b) Total amount of fees paid

3 Persons receiving commissions and fees. (Complete as many entries as needed to report all persons).

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

Part II Investment and Annuity Contract Information

Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

4	Current value of plan's interest under this contract in the general account at year end	4	3979483
5	Current value of plan's interest under this contract in separate accounts at year end	5	

6 Contracts With Allocated Funds:

a State the basis of premium rates ▶

b	Premiums paid to carrier	6b	
c	Premiums due but unpaid at the end of the year	6c	
d	If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount.	6d	

Specify nature of costs ▶

e Type of contract: (1) ☐ individual policies (2) ☐ group deferred annuity

(3) ☐ other (specify) ▶

f If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ▶ ☐

7 Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)

a Type of contract: (1) ☐ deposit administration (2) ☐ immediate participation guarantee

(3) ☐ guaranteed investment (4) ☒ other ▶ GROUP ANNUITY CONTRACT

b	Balance at the end of the previous year			7b	7284378
c	Additions: (1) Contributions deposited during the year	7c(1)	69347		
	(2) Dividends and credits	7c(2)	0		
	(3) Interest credited during the year	7c(3)	107766		
	(4) Transferred from separate account	7c(4)	936735		
	(5) Other (specify below)	7c(5)	2972		
	▶ LOAN REPAYMENTS				
	(6)Total additions			7c(6)	1116820
d	Total of balance and additions (add lines **7b** and **7c(6)**).			7d	8401198
e	Deductions:				
	(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)	326240		
	(2) Administration charge made by carrier	7e(2)	5137		
	(3) Transferred to separate account	7e(3)	4079573		
	(4) Other (specify below)	7e(4)	10765		
	▶ LOANS ISSUED				
	(5) Total deductions			7e(5)	4421715
f	Balance at the end of the current year (subtract line **7e(5)** from line **7d**)			7f	3979483

Part III Welfare Benefit Contract Information

If more than one contract covers the same group of employees of the same employer(s) or members of the same employee organizations(s), the information may be combined for reporting purposes if such contracts are experience-rated as a unit. Where contracts cover individual employees, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

8 Benefit and contract type (check all applicable boxes)

- **a** ☐ Health (other than dental or vision)
- **b** ☐ Dental
- **c** ☐ Vision
- **d** ☐ Life insurance
- **e** ☐ Temporary disability (accident and sickness)
- **f** ☐ Long-term disability
- **g** ☐ Supplemental unemployment
- **h** ☐ Prescription drug
- **i** ☐ Stop loss (large deductible)
- **j** ☐ HMO contract
- **k** ☐ PPO contract
- **l** ☐ Indemnity contract
- **m** ☐ Other (specify) ▶

9 Experience-rated contracts:				
a Premiums: (1) Amount received	**9a(1)**			
(2) Increase (decrease) in amount due but unpaid	**9a(2)**			
(3) Increase (decrease) in unearned premium reserve	**9a(3)**			
(4) Earned (**(1)** + **(2)** - **(3)**)			**9a(4)**	0
b Benefit charges (1) Claims paid	**9b(1)**			
(2) Increase (decrease) in claim reserves	**9b(2)**			
(3) Incurred claims (add **(1)** and **(2)**)			**9b(3)**	0
(4) Claims charged			**9b(4)**	
c Remainder of premium: (1) Retention charges (on an accrual basis) --				
(A) Commissions	**9c(1)(A)**			
(B) Administrative service or other fees	**9c(1)(B)**			
(C) Other specific acquisition costs	**9c(1)(C)**			
(D) Other expenses	**9c(1)(D)**			
(E) Taxes	**9c(1)(E)**			
(F) Charges for risks or other contingencies	**9c(1)(F)**			
(G) Other retention charges	**9c(1)(G)**			
(H) Total retention			**9c(1)(H)**	0
(2) Dividends or retroactive rate refunds. (These amounts were ☐ paid in cash, or ☐ credited.)			**9c(2)**	
d Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement			**9d(1)**	
(2) Claim reserves			**9d(2)**	
(3) Other reserves			**9d(3)**	
e Dividends or retroactive rate refunds due. (Do not include amount entered in line **9c(2)**.)			**9e**	
10 Nonexperience-rated contracts:				
a Total premiums or subscription charges paid to carrier			**10a**	
b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount.			**10b**	

Specify nature of costs.

Part IV Provision of Information

11 Did the insurance company fail to provide any information necessary to complete Schedule A? ☐ Yes ☒ No

12 If the answer to line 11 is "Yes," specify the information not provided. ▶

SCHEDULE A (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Insurance 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.**

▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).

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
MNS, LTD. PROFIT-SHARING PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
MNS, LTD.

D Employer Identification Number (EIN)
71-1007574

Part I **Information Concerning Insurance Contract Coverage, Fees, and Commissions** Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.

1 Coverage Information:

(a) Name of insurance carrier
NEW YORK LIFE INSURANCE COMPANY

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
13-5582869	66915	GA32308	23	07/01/2025	12/31/2025

2 Insurance fee and commission information. Enter the total fees and total commissions paid. List in line 3 the agents, brokers, and other persons in descending order of the amount paid.

(a) Total amount of commissions paid	(b) Total amount of fees paid

3 Persons receiving commissions and fees. (Complete as many entries as needed to report all persons).

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	

Part II Investment and Annuity Contract Information

Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

4	Current value of plan's interest under this contract in the general account at year end	4	759987
5	Current value of plan's interest under this contract in separate accounts at year end	5	

6 Contracts With Allocated Funds:

a State the basis of premium rates ▶

b	Premiums paid to carrier	6b	
c	Premiums due but unpaid at the end of the year	6c	
d	If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount.	6d	

Specify nature of costs ▶

e Type of contract: (1) ☐ individual policies (2) ☐ group deferred annuity

(3) ☐ other (specify) ▶

f If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ▶ ☐

7 Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)

a Type of contract: (1) ☐ deposit administration (2) ☐ immediate participation guarantee

(3) ☐ guaranteed investment (4) ☒ other ▶ GROUP ANNUITY CONTRACT

b	Balance at the end of the previous year			7b	0
c	Additions: (1) Contributions deposited during the year	7c(1)	47119		
	(2) Dividends and credits	7c(2)	0		
	(3) Interest credited during the year	7c(3)	7092		
	(4) Transferred from separate account	7c(4)	752116		
	(5) Other (specify below)	7c(5)	4312		
	▶ LOAN REPAYMENTS				
	(6)Total additions			7c(6)	810639
d	Total of balance and additions (add lines **7b** and **7c(6)**).			7d	810639
e	Deductions:				
	(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)	1834		
	(2) Administration charge made by carrier	7e(2)	9		
	(3) Transferred to separate account	7e(3)	46734		
	(4) Other (specify below)	7e(4)	2075		
	▶ LOANS ISSUED				
	(5) Total deductions			7e(5)	50652
f	Balance at the end of the current year (subtract line **7e(5)** from line **7d**)			7f	759987

Part III Welfare Benefit Contract Information

If more than one contract covers the same group of employees of the same employer(s) or members of the same employee organizations(s), the information may be combined for reporting purposes if such contracts are experience-rated as a unit. Where contracts cover individual employees, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

8 Benefit and contract type (check all applicable boxes)

- **a** ☐ Health (other than dental or vision)
- **b** ☐ Dental
- **c** ☐ Vision
- **d** ☐ Life insurance
- **e** ☐ Temporary disability (accident and sickness)
- **f** ☐ Long-term disability
- **g** ☐ Supplemental unemployment
- **h** ☐ Prescription drug
- **i** ☐ Stop loss (large deductible)
- **j** ☐ HMO contract
- **k** ☐ PPO contract
- **l** ☐ Indemnity contract
- **m** ☐ Other (specify) ▶

9 Experience-rated contracts:				
a Premiums: (1) Amount received	**9a(1)**			
(2) Increase (decrease) in amount due but unpaid	**9a(2)**			
(3) Increase (decrease) in unearned premium reserve	**9a(3)**			
(4) Earned (**(1)** + **(2)** - **(3)**)			**9a(4)**	0
b Benefit charges (1) Claims paid	**9b(1)**			
(2) Increase (decrease) in claim reserves	**9b(2)**			
(3) Incurred claims (add **(1)** and **(2)**)			**9b(3)**	0
(4) Claims charged			**9b(4)**	
c Remainder of premium: (1) Retention charges (on an accrual basis) --				
(A) Commissions	**9c(1)(A)**			
(B) Administrative service or other fees	**9c(1)(B)**			
(C) Other specific acquisition costs	**9c(1)(C)**			
(D) Other expenses	**9c(1)(D)**			
(E) Taxes	**9c(1)(E)**			
(F) Charges for risks or other contingencies	**9c(1)(F)**			
(G) Other retention charges	**9c(1)(G)**			
(H) Total retention			**9c(1)(H)**	0
(2) Dividends or retroactive rate refunds. (These amounts were ☐ paid in cash, or ☐ credited.)			**9c(2)**	
d Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement			**9d(1)**	
(2) Claim reserves			**9d(2)**	
(3) Other reserves			**9d(3)**	
e Dividends or retroactive rate refunds due. (Do not include amount entered in line **9c(2)**.)			**9e**	
10 Nonexperience-rated contracts:				
a Total premiums or subscription charges paid to carrier			**10a**	
b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount.			**10b**	

Specify nature of costs.

Part IV Provision of Information

11 Did the insurance company fail to provide any information necessary to complete Schedule A? ☐ Yes ☒ No

12 If the answer to line 11 is "Yes," specify the information not provided. ▶

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	**B** Three-digit plan number (PN) ▶	
MNS, LTD. PROFIT-SHARING PLAN		001
C Plan sponsor's name as shown on line 2a of Form 5500	**D** Employer Identification Number (EIN)	
MNS, LTD.	71-1007574	

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

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

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)

ONEAMERICA RETIREMENT SERVICES, LLC

46-5378846

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
15 37 38 50 64 65	NONE	320831	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

THE LONDON COMPANY

99-0824693

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51	NONE	148074	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

GAMCO ASSET MANAGEMENT INC.

249 ROYAL PALM WAY, SUITE 503
PALM BEACH, FL 33480

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51	NONE	110278	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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)

ATALANTA SOSNOFF CAPITAL CORP

13-3098641

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51	NONE	80720	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

ALLSPRING GLOBAL INVESTMENTS

525 MARKET STREET, 12TH FLOOR
SAN FRANCISCO, CA 94105

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51	NONE	72305	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

SAGEVIEW

900 FORT STREET MALL, PIONEER PLAZA
SUITE 1505
HONOLULU, HI 96813

(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?
17 27 51	NONE	70000	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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)

NUVEEN

25604 NETWORK PLACE
CHICAGO, IL 60673-1256

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 51	NONE	46005	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

MG TRUST CO. DBA MATRIX TRUST CO.

75-3182674

(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?
18 19 21 25 49 50 62	NONE	8000	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [X] No [ ]

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

MSCS FS DIV OF BROADRIDGE BPO, LLC

33-1151291

(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?
59 60 61 62 63 68	NONE	0	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
MATRIX TRUST COMPANY	18 19 21 25 62	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
MATRIX TRUST COMPANY 75-3182674	SEE ATTACHMENT MATRIX TRUST COMPANY SCHEDULE C DISCLOSURES

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
MSCS FS DIV OF BROADRIDGE BPO, LLC	59 60 61 68	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
MSCS FS DIV OF BROADRIDGE BPO, LLC 33-1151291	SEE ATTACHMENT MATRIX TRUST COMPANY SCHEDULE C DISCLOSURES

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

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

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

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

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

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

(complete as many entries as needed)

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

SCHEDULE H (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Financial Information

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

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

OMB No. 1210-0110

2025

This Form is Open to Public Inspection

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

A Name of plan
MNS, LTD. PROFIT-SHARING PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
MNS, LTD.

D Employer Identification Number (EIN)
71-1007574

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	25377	188300
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	4237288	4337000
(2) Participant contributions	1b(2)	451672	185002
(3) Other	1b(3)	279887	278803
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		
(2) U.S. Government securities	1c(2)	17586265	19303694
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)	1806405	2052287
(B) All other	1c(3)(B)	5512489	5387053
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)	87561816	70326339
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)	4943465	5561442
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	131863479	182118731
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)	7284378	4739470
(15) Other	1c(15)	4203848	4524990

		(a) Beginning of Year	(b) End of Year
1d Employer-related investments:			
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
1e Buildings and other property used in plan operation	1e		
1f Total assets (add all amounts in lines 1a through 1e)	1f	265756369	299003111
Liabilities			
1g Benefit claims payable	1g		
1h Operating payables	1h		
1i Acquisition indebtedness	1i		
1j Other liabilities	1j	1622734	179846
1k Total liabilities (add all amounts in lines 1g through1j)	1k	1622734	179846
Net Assets			
1l Net assets (subtract line 1k from line 1f)	1l	264133635	298823265

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)	4337000	
(B) Participants	2a(1)(B)	9278457	
(C) Others (including rollovers)	2a(1)(C)	510046	
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		14125503
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	80	
(B) U.S. Government securities	2b(1)(B)	909938	
(C) Corporate debt instruments	2b(1)(C)	384438	
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)	386136	
(F) Other	2b(1)(F)	106350	
(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		1786942
(2) Dividends: **(A)** Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)	1428303	
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	14682633	
(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		16110936
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)	79744779	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	76177700	
(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		3567079
(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)		
(B) Other	2b(5)(B)	10689911	
(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		10689911

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		4063405
c Other income	2c		30118
d Total income. Add all **income** amounts in column (b) and enter total	2d		50373894
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	14808983	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)		
(4) Total benefit payments. Add lines **2e(1)** through **(3)**	2e(4)		14808983
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		23100
h Interest expense	2h		
i Administrative expenses:			
(1) Salaries and allowances	2i(1)		
(2) Contract administrator fees	2i(2)	320831	
(3) Recordkeeping fees	2i(3)		
(4) IQPA audit fees	2i(4)		
(5) Investment advisory and investment management fees	2i(5)	527381	
(6) Bank or trust company trustee/custodial fees	2i(6)		
(7) Actuarial fees	2i(7)		
(8) Legal fees	2i(8)		
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)		
(11) Other expenses	2i(11)	3969	
(12) Total administrative expenses. Add lines **2i(1)** through **(11)**	2i(12)		852181
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		15684264
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		34689630
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: ACCUITY, LLP **(2)** EIN: 20-5325889

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		2493
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
MNS, LTD. PROFIT-SHARING PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
MNS, LTD.

D Employer Identification Number (EIN)
71-1007574

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): 75-3182674

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

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

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

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

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

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

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

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

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

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

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

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

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

Part III Amendments

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

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

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

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

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

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

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

☐ Yes.

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

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

☐ No. Other. Provide explanation._____

Part VII IRS Compliance Questions

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

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

☐ Design-based safe harbor method

☒ "Prior year" ADP test

☐ "Current year" ADP test

☐ N/A

22 If the plan sponsor is an adopter of a pre-approved plan that received a favorable IRS Opinion Letter, enter the date of the Opinion Letter 06 / 30 / 2020 (MM/DD/YYYY) and the Opinion Letter serial number Q704015A .

Profit Sharing Plan of MNS, Ltd.

Financial Statements and Supplemental Schedules

December 31, 2025 and 2024

Profit Sharing Plan of MNS, Ltd.
Index

Page(s)

Report of Independent Auditors

Financial Statements

Statements of Net Assets Available for Benefits
December 31, 2025 and 2024 5

Statement of Changes in Net Assets Available for Benefits
Year Ended December 31, 2025 6

Notes to Financial Statements
December 31, 2025 and 2024 7–13

Supplemental Schedules

Schedule I – Form 5500, Schedule H, Line 4a – Schedule of Delinquent Participant Contributions
Year Ended December 31, 2024 14

Schedule II – Form 5500, Schedule H, Line 4i – Schedule of Assets (Held at End of Year)
December 31, 2025 15–31

Schedule III – Form 5500, Schedule H, Line 4i – Schedule of Assets (Acquired and Disposed of Within Year)
Year Ended December 31, 2025 32-33

Schedule IV – Form 5500, Schedule H, Line 4j – Schedule of Reportable Transactions
Year Ended December 31, 2025 34

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Report of Independent Auditors

To the Participants, Administrator
and Executive Committee of
Profit Sharing Plan of MNS, Ltd.

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

We have performed audits of the accompanying financial statements of the Profit Sharing Plan of MNS, Ltd. (the "Plan"), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 ("ERISA"), as permitted by ERISA Section 103(a)(3)(C) ("ERISA Section 103(a)(3)(C) audit"). The financial statements comprise the statements of net assets available for benefits as of December 31, 2025 and 2024, and the related statement of changes in net assets available for benefits for the year ended December 31, 2025, and the related notes to the financial statements.

Management, having determined it is permissible in the circumstances, has elected to have the audits of the Plan's financial statements performed in accordance with ERISA Section 103(a)(3)(C) pursuant to 29 CFR 2520.103-8 of the Department of Labor's ("DOL") 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 DOL's Rules and Regulations for Reporting and Disclosure under ERISA ("qualified institution").

Management has obtained certifications from a qualified institution as of December 31, 2025 and 2024, and for the year ended December 31, 2025, stating that the certified investment information, as described in Note 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 Auditors' Responsibilities for the Audit of the Financial Statements section:

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

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

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Our responsibilities under those standards are further described in the Auditors' Responsibilities for the Audit of the Financial Statements

section of our report. We are required to be independent of the Plan and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our ERISA Section 103(a)(3)(C) audit opinion.

Responsibilities of Management for the Financial Statements

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

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

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

Auditors' Responsibilities for the Audit of the Financial Statements

Except as described in the Scope and Nature of the ERISA Section 103(a)(3)(C) Audits section of our report, our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditors' report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with auditing standards generally accepted in the United States of America 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 auditing standards generally accepted in the United States of America, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.

- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Plan's internal control. Accordingly, no such opinion is expressed.

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

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

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

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

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

Supplemental Schedules Required by ERISA

The supplemental Schedule of Delinquent Participant Contributions for the year ended December 31, 2024, and the Schedule of Assets (Held at End of Year), Schedule of Assets (Acquired and Disposed of Within Year), and Schedule of Reportable Transactions as of or for the year ended December 31, 2025 are presented for purposes of additional analysis and are not a required part of the financial statements but are supplementary information required by the DOL'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 audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. 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 DOL'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 DOL's Rules and Regulations for Reporting and Disclosure under ERISA.

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- 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).

Accuity LLP

Honolulu, Hawaii
October 9, 2026

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Profit Sharing Plan of MNS, Ltd.
Statements of Net Assets Available for Benefits
December 31, 2025 and 2024

	2025	2024
Assets		
Investments, at fair value	$ 283,713,094	$ 248,534,302
Investment, at contract value	4,739,470	7,284,378
Noninterest bearing cash	188,300	25,377
Receivables		
Employer contributions	4,337,000	4,237,288
Participant contributions	185,002	451,672
Accrued income	278,803	279,887
Notes receivable from participants	5,584,542	4,943,465
Total assets	299,026,211	265,756,369
Liabilities		
Accrued liabilities	179,846	1,622,734
Total liabilities	179,846	1,622,734
Net assets available for benefits	$ 298,846,365	$ 264,133,635

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

Profit Sharing Plan of MNS, Ltd.
Statement of Changes in Net Assets Available for Benefits
Year Ended December 31, 2025

	Nonparticipant-Directed	Participant-Directed	Total
Investment income			
Net appreciation in fair value of investments	$ 13,963,476	$ 4,355,570	$ 18,319,046
Interest income	1,294,456	106,350	1,400,806
Dividend income	2,224,767	13,886,170	16,110,937
Total investment income	17,482,699	18,348,090	35,830,789
Other income	22,894	7,224	30,118
Interest income on notes receivable from participants	243,927	142,209	386,136
Contributions			
Employer	3,333,333	1,003,667	4,337,000
Participant	-	9,278,457	9,278,457
Rollover	-	510,046	510,046
Total contributions	3,333,333	10,792,170	14,125,503
Deductions			
Benefits paid to participants	(8,685,944)	(6,121,691)	(14,807,635)
Administrative expenses	(647,253)	(204,928)	(852,181)
Total deductions	(9,333,197)	(6,326,619)	(15,659,816)
Net increase	11,749,656	22,963,074	34,712,730
Net assets available for benefits			
Beginning of year	126,985,046	137,148,589	264,133,635
End of year	$ 138,734,702	$ 160,111,663	$ 298,846,365

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

1. Description of Plan

The Profit Sharing Plan of MNS, Ltd. (the "Plan") was initially adopted on June 1, 1958. The Plan was amended at various dates since adoption to reflect changes in the applicable laws and regulations. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA"). The following description of the Plan provides only general information. Participants should refer to the plan document for a complete description of the Plan's provisions.

Principal provisions of the amended Plan are as follows:

Participation: Employees of MNS, Ltd., ABC Stores – Guam, ABC Stores – Saipan, and MNSNV, LLC (collectively the "Company") are eligible to make elective deferral contributions starting on the first day of the calendar month, next following the date after completion of three months of service. Effective January 1, 2025, employees who become eligible to participate in the Plan are automatically enrolled in pre-tax elective deferral contributions at a rate of 3%. Participants may elect an alternative deferral rate or opt out of participation. Employees are eligible to begin receiving employer matching contributions and discretionary employer contributions on the first day of the calendar month after completion of one year of service of at least 1,000 hours.

Vesting: Benefits vest 20% annually commencing after two years of vesting service, with full vesting after six years of service.

Contributions – Employer: The Company may contribute (employer's matching contribution) amounts equal to 25% of the deferred contributions made by eligible participants (up to a maximum of $750 for any one participant in a plan year) in accordance with provisions of the Plan.

The Company may also contribute an additional sum to the Plan provided that contributions shall not exceed the maximum allowable as a deduction under the Internal Revenue Code ("IRC"). Discretionary employer contributions are nonparticipant directed. The amount paid in 2026 related to discretionary employer contributions for 2025 was $3,333,333.

Contributions – Participants: Contributions by participants are voluntary and shall not exceed the maximum allowable as a deduction under the IRC. Participants age 50 or older may make catch-up contributions up to the standard IRC catch-up limit applicable for the year. Effective January 1, 2025, participants ages 60 through 63 may make enhanced catch-up contributions of $11,250 in 2025. Participants are able to direct the custodian to change their contribution and the employer's matching portion between certain portfolios and/or mutual funds.

Allocation to Participant's Accounts: Discretionary employer contributions are allocated to participants annually based upon compensation and service with the Company.

Forfeitures, net of reinstatements, are allocated in the subsequent year to remaining eligible participants based upon compensation and service with the Company. For the year ended December 31, 2025, there were forfeited nonvested amounts totaling approximately $171,000, which were subsequently allocated to participant accounts.

Participant Loans: Participants may borrow the lesser of 50% of their vested balance reduced by the current loan balances outstanding or $50,000 reduced by the excess (if any) of the highest outstanding balance of loans during the previous 12 months reduced by the current loan balances outstanding, subject to approval by the Administrative Committee. The loans are collateralized by the balances in the participants' accounts, bear interest at rates ranging from 3.25% to 8.50%, and bear maturity dates ranging from 2026 to 2035. Principal and interest are to be repaid monthly within five years, and up to ten years if used to purchase a home.

Withdrawals by Active Participants: In situations specifically described in the plan document, the Administrative Committee shall make an in-service distribution to an active participant from the vested portion of their Plan account upon written application from the participant.

Plan Termination: Although it has not expressed any intent to do so, the Company has the right to discontinue contributions or terminate the Plan at any time subject to the provisions of ERISA. If contributions are completely discontinued or the Plan is completely or partially terminated, then the interests of each participant in the Plan shall become fully vested.

2. Summary of Significant Accounting Policies

Basis of Accounting

The financial statements of the Plan are prepared on the accrual basis of accounting in conformity with accounting principles generally accepted in the United States of America.

Use of Estimates

The preparation of the Plan's 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 net assets available for benefits during the reporting period and when applicable, disclosures of contingent assets and liabilities at the date of the financial statements, and the reported amounts of additions and deductions during the reporting period. Actual results could differ from those estimates.

Risks and Uncertainties

The Plan invests in a variety of investments. These investments 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 value of investment securities will occur in the near term and that such changes could materially affect participant account balances and the amounts reported in

the statements of net assets available for benefits and the statement of changes in net assets available for benefits.

Fair Value Measurements
For financial assets reported at fair value, the Plan defines fair value as the price that would be received to sell an asset in the principal or most advantageous market in an orderly transaction between market participants. The Plan measures fair value using observable and unobservable inputs based on the following hierarchy:

- **Level 1** – Quoted prices (unadjusted) in active markets for identical assets that the Plan has the ability to access at the measurement date.

- **Level 2** – Inputs other than quoted market prices included within Level 1 that are observable for an asset, directly or indirectly.

- **Level 3** – Unobservable inputs for an asset reflecting the Plan's own assumptions. Level 3 inputs should be used to measure fair value to the extent that observable Level 1 or Level 2 inputs are not available.

Fair Value of Investments
The following methods and assumptions were used by the Plan in estimating the fair value of its investments:

- **Common stock** – The fair value of common stock traded on a national securities exchange is based on the last reported sales price on the last business day of the plan year and is generally categorized as Level 1 in the fair value hierarchy.

- **Mutual funds** – The fair value of mutual funds is based on quoted market prices which represent the net asset value of units held by the Plan at the plan year-end and is generally categorized as Level 1 in the fair value hierarchy.

- **Corporate bonds, U.S. government agency securities, U.S. Treasury obligations, and municipal bonds** – The fair value of these investments was estimated using an income approach based on estimated pricing models with inputs based upon comparative investments, and is generally categorized as Level 2 in the fair value hierarchy.

- **Asset backed securities and real estate mortgage investment conduits** – The fair value of these investments was estimated using an income approach based on a discounted cash flow analysis utilizing collateral characteristics and current market assumptions related to yield, prepayment speed, conditional default rates, and loss severity, and is generally categorized as Level 2 in the fair value hierarchy.

The Plan presents in the statement of changes in net assets available for benefits, the net appreciation in the fair value of investments, which consists of the realized gains and losses and the unrealized appreciation or depreciation on those investments.

Purchases and sales of securities are recorded on the trade date.

Fully Benefit-Responsive Investment Contracts
The Plan's investments in the American United Life ("AUL") guaranteed group annuity contract ("AUL contract") and the New York Life Insurance Company ("New York Life") Anchor Account Group annuity contract ("New York Life contract") (collectively "contracts") qualify as fully benefit-responsive investment contracts. Therefore, contract value is the relevant measurement attribute for the portion of net assets available for benefits attributable to the guaranteed group annuity contracts. Contract value represents the contributions made under the contracts, plus earnings, less participant withdrawals and administrative expenses. Contributions under the contracts are maintained in accounts that are credited with interest and charged for participant withdrawals and administrative expenses. Participants may ordinarily direct the withdrawal or transfer of all or a portion of their investment at contract value. The guaranteed group annuity contract issuers are contractually obligated to repay the principal and a specified interest rate guaranteed to the Plan. The interest crediting rates under the contracts are declared annually but may not be less than 0%. For the year ended December 31, 2025, the average yield credited to participants for the AUL guaranteed annuity contract and New York Life contract was 2.50% and 3.91%, respectively.

The plan administrator continually monitors for the occurrence of certain events that limit the ability of the Plan to transact at contract value with the issuers. Such events include the following: (1) amendments to the plan documents (including complete or partial plan termination or merger with another plan); (2) bankruptcy of the plan sponsor or other plan sponsor events (for example, divestitures or spin-offs of a subsidiary) that cause a significant withdrawal from the Plan; or (3) the failure of the trust to qualify for exemption from federal income taxes or any required prohibited transaction exemption under ERISA. The plan administrator does not believe that the occurrence of any such events, which would limit the Plan's ability to transact at contract value with participants, is probable.

AUL may terminate the AUL contract if (1) the Plan rejects any allowable contract modifications; (2) AUL ceases issuing new contracts of this type and intends to terminate all contracts of a similar nature; (3) the Plan's account value is less than $100,000 after three years; (4) the Plan is operated or administered in a manner that would disqualify it, is unlawful, and violates ERISA or the IRC; or (5) the Company files for protection under federal bankruptcy law, is deemed insolvent, or ceases operations. New York Life may terminate the New York Life contract for any reason with 12 months advance notice to the Plan, or if the Plan fails to maintain its qualified status under section 401(a) of the IRC.

Notes Receivable from Participants
Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Interest income is recorded on an accrual basis. Related fees are recorded as administrative expenses and are expensed when they are incurred. No allowance for credit losses has been recorded as of December 31, 2025 or 2024. If a participant ceases to make loan repayments and the plan administrator deems the participant loan to be in default, the participant loan balance is reduced and a benefit payment is recorded.

Payment of Benefits
Benefits are recorded when paid. There were no participant elections to withdraw funds that remained unexecuted as of December 31, 2025 and 2024.

Income Taxes
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 or asset 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 that as of December 31, 2025, there are no uncertain positions taken or expected to be taken that would

require recognition of a liability or asset or disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. The 2022 through 2024 tax years remain open for income tax examination.

Subsequent Events
Management has reviewed all events that have occurred from January 1, 2026 through October 9, 2026, the date that the financial statements were available for issuance, for proper accounting and disclosure in the financial statements.

3. Investments

Investments held and certified by the custodian and trustee at December 31, 2025 and 2024 are summarized as follows:

	Nonparticipant-Directed	Participant-Directed	Total
December 31, 2025			
Mutual funds	$ 30,089,984	$ 152,028,747	$ 182,118,731
Common stock	70,326,339	-	70,326,339
Corporate bonds	7,439,340	-	7,439,340
U.S. government agency securities	7,693,638	-	7,693,638
U.S. Treasury obligations	11,610,056	-	11,610,056
Asset-backed securities	2,570,358	-	2,570,358
Real estate mortgage investment conduits	1,791,046	-	1,791,046
Municipal bonds	163,586	-	163,586
Total investments, at fair value	131,684,347	152,028,747	283,713,094
Guaranteed group annuity contracts	-	4,739,470	4,739,470
Total investments	$ 131,684,347	$ 156,768,217	$ 288,452,564
December 31, 2024			
Mutual funds	$ 4,736,856	$ 127,126,623	$ 131,863,479
Common stock	87,561,816	-	87,561,816
Corporate bonds	7,318,894	-	7,318,894
U.S. government agency securities	7,982,431	-	7,982,431
U.S. Treasury obligations	9,603,834	-	9,603,834
Asset-backed securities	1,412,175	-	1,412,175
Real estate mortgage investment conduits	2,413,548	-	2,413,548
Municipal bonds	378,125	-	378,125
Total investments, at fair value	121,407,679	127,126,623	248,534,302
Guaranteed group annuity contract	-	7,284,378	7,284,378
Total investments	$ 121,407,679	$ 134,411,001	$ 255,818,680

The Plan's investments reported at fair value on a recurring basis have been categorized based on the fair value hierarchy in Note 2 at December 31, 2025 and 2024 as follows:

	Level 1	Level 2	Estimated Fair Value
December 31, 2025			
Mutual funds	$ 182,118,731	$ -	$ 182,118,731
Common stock	70,326,339	-	70,326,339
Corporate bonds	-	7,439,340	7,439,340
U.S. government agency securities	-	7,693,638	7,693,638
U.S. Treasury obligations	-	11,610,056	11,610,056
Asset-backed securities	-	2,570,358	2,570,358
Real estate mortgage investment conduits	-	1,791,046	1,791,046
Municipal bonds	-	163,586	163,586
	$ 252,445,070	$ 31,268,024	$ 283,713,094
December 31, 2024			
Mutual funds	$ 131,863,479	$ -	$ 131,863,479
Common stock	87,561,816	-	87,561,816
Corporate bonds	-	7,318,894	7,318,894
U.S. government agency securities	-	7,982,431	7,982,431
U.S. Treasury obligations	-	9,603,834	9,603,834
Asset-backed securities	-	1,412,175	1,412,175
Real estate mortgage investment conduits	-	2,413,548	2,413,548
Municipal bonds	-	378,125	378,125
	$ 219,425,295	$ 29,109,007	$ 248,534,302

The following information has been certified as complete and accurate by Broadridge Matrix Trust Company, the custodian and trustee of the Plan:

- All information related to investment balances, noninterest bearing cash, and notes receivable from participants presented in the statements of net assets available for benefits at December 31, 2025 and 2024.

- Interest and dividend income, interest income on notes receivable from participants, and net appreciation in fair value of investments presented in the statement of changes in net assets available for benefits for the year ended December 31, 2025.

- All information included in the supplemental schedules as of and for the year ended December 31, 2025, except for the Schedule of Delinquent Participant Contributions for the year ended December 31, 2024.

4. Tax Status

The United States Treasury Department advised on July 7, 2010 that the Plan, as amended, constituted a qualified trust under Sections 401(a) and 401(k) of the IRC and is therefore exempt from federal income taxes under the provisions of Section 501(a). The Plan has been amended and restated since receiving the determination letter. The plan administrator believes that the Plan is currently designed and is being operated in compliance with the applicable requirements of the IRC.

5. Party-in-Interest Transactions

Transactions with Broadridge Matrix Trust Company, custodian and trustee, One America Retirement Services, recordkeeper, and the Plan's investment advisor and investment managers qualify as party-in-interest transactions. Administrative fees related to the Plan's custodian, recordkeeper, trustee, investment advisor, and investment managers amounted to $852,181 in 2025.

Certain Plan investments are units of a guaranteed group annuity contract managed by AUL, an affiliate of One America Financial Partners, Inc. The Plan invests in a money market mutual fund that was managed by Broadridge Matrix Trust Company.

6. Reconciliation of Financial Statements to Form 5500

In 2025, certain notes receivable from participants became delinquent. The points in time in which delinquent notes receivable from participants are deemed to be distributions are different for financial reporting purposes and the IRC. As a result, net assets available for benefits as of and for the year ended December 31, 2025 as reported in the financial statements differ from the Form 5500 due to these deemed distributions:

	Financial Statements	Difference	Form 5500
Net assets available for benefits	$ 298,846,365	$ (23,100)	$ 298,823,265
Increase in net assets available for benefits	34,712,730	(23,100)	34,689,630

There were no differences in net assets available for benefits as of December 31, 2024.

Profit Sharing Plan of MNS, Ltd.

Form 5500, Schedule H, Line 4a – Schedule of Delinquent Participant Contributions

Year Ended December 31, 2024 — Supplemental Schedule I

Employer Identification Number: 71-1007574
Plan Number: 001

2024 Delinquent Participant Contributions

Participant Contributions Transferred Late to Plan	Total that Constitute Nonexempt Prohibited Transactions			Total Fully Corrected Under VFCP* and PTE** 2002-51
Check here if Late Participant Loan Repayments are included: ☑	Contributions Not Corrected	Contributions Corrected Outside VFCP	Contributions Pending Correction in VFCP	
$ 2,493	$ -	$ 2,493	$ -	$ -

* Voluntary Fiduciary Correction Program
** Prohibited Transaction Exemption

Profit Sharing Plan of MNS, Ltd.

Form 5500, Schedule H, Line 4i – Schedule of Assets (Held at End of Year)

December 31, 2025

Supplemental Schedule II

Employer Identification Number: 71-1007574
Plan Number: 001

Identity of Issue, Borrower, Lessor or Similar Party	Maturity Date	Interest Rate	Collateral	Shares or Units	Par or Maturity Value	Current Value	Cost
Mutual Funds							
American Century Small Cap Value R6	–	–	–	1,002,607	–	$ 9,003,410	***
American Funds Growth Fund of Amer R6	–	–	–	543,509	–	43,790,516	***
Dodge & Cox International Stock Cl I	–	–	–	60,945	–	1,003,149	***
Fidelity® 500 Index Institutional Prem	–	–	–	72,104	–	17,140,582	$ 17,052,116
Hartford World Bond R6	–	–	–	15,384	–	153,991	***
JPMorgan Core Plus Bond Fund R6	–	–	–	1,717,703	–	12,573,584	***
PIMCO Income Instl	–	–	–	274,792	–	3,019,960	3,014,504
T. Rowe Price New Horizons	–	–	–	198,257	–	10,251,846	***
Vanguard Equity-Income Inv	–	–	–	946,052	–	41,947,964	***
Vanguard Interm-Term Bond Index Adm	–	–	–	1,248,185	–	13,180,829	***
Vanguard Strategic Equity Inv ****	–	–	–	660,852	–	24,788,570	23,346,986
Vanguard Strategic Small-Cap Equity Inv	–	–	–	10,941	–	463,557	***
BlackRock Liq Fd Treasury In	–	–	–	2,911,569	–	2,911,569	2,911,569
Wilmington U.S. Government Money Mkt Instl **	–	–	–	1,889,204	–	1,889,204	1,889,204
Total Mutual Funds						**182,118,731**	**48,214,379**
Common Stock							
Aar Corp	–	–	–	400	–	33,116	23,236
Abbvie Inc	–	–	–	1,884	–	430,475	304,437
Advance Auto Parts Inc	–	–	–	600	–	23,580	22,517
Affirm Holdings Inc	–	–	–	1,340	–	99,736	92,608
Air Products & Chemicals Inc	–	–	–	3,965	–	979,434	1,004,455
Alnylam Pharmaceuticals Inc	–	–	–	325	–	129,236	92,522
Alphabet Inc CL A	–	–	–	7,234	–	2,264,242	1,385,734
Altria Group Inc	–	–	–	10,759	–	620,364	414,527
Amazon Com Inc	–	–	–	6,747	–	1,557,343	855,210
AMC Networks Inc A	–	–	–	2,000	–	19,040	48,793

The information in this schedule has been certified as to its completeness and accuracy by the custodian and trustee.

Profit Sharing Plan of MNS, Ltd.

Form 5500, Schedule H, Line 4i – Schedule of Assets (Held at End of Year)

December 31, 2025

Supplemental Schedule II

Identity of Issue, Borrower, Lessor or Similar Party	Maturity Date	Interest Rate	Collateral	Shares or Units	Par or Maturity Value	Current Value	Cost
American Express Co.	–	–	–	766	–	283,382	200,022
American International Group	–	–	–	400	–	34,220	15,566
Amphenol CL A	–	–	–	1,236	–	167,033	172,554
Apple Inc	–	–	–	11,527	–	3,133,730	801,692
Applovin Corp Class A	–	–	–	354	–	238,532	47,885
Archer Daniels Midland	–	–	–	500	–	28,745	6,202
Argenx Se – ADR	–	–	–	163	–	137,075	94,369
Arista Networks Inc	–	–	–	2,388	–	312,900	244,354
Array Digital Infrastructure I	–	–	–	1,000	–	53,620	32,993
Astec Inds Inc	–	–	–	1,500	–	64,980	59,712
Astera Labs Inc	–	–	–	570	–	94,825	100,002
Astrazeneca Plc Sponsored ADR	–	–	–	1,773	–	162,992	150,047
Atlanta Braves Holdings Inc A	–	–	–	7,500	–	318,675	214,556
Atlanta Braves Holdings Inc C	–	–	–	2,000	–	78,900	54,298
Autozone Inc.	–	–	–	39	–	132,269	107,756
Axon Enterprise Inc	–	–	–	221	–	125,513	84,059
Bank of America Corp	–	–	–	7,350	–	404,250	362,965
Berkshire Hathaway Inc Cl B	–	–	–	2,110	–	1,060,592	364,409
BlackRock Inc	–	–	–	1,166	–	1,248,016	293,144
Booking Holdings Inc	–	–	–	38	–	203,503	133,080
Boston Scientific	–	–	–	5,400	–	514,890	277,874
Bridgebio Pharma Inc	–	–	–	1,762	–	134,775	102,199
Broadcom Ltd	–	–	–	3,821	–	1,322,448	608,921
Bunge Limited Com	–	–	–	1,000	–	89,080	61,811
Burnham Holdings Inc CL A	–	–	–	1,000	–	25,070	18,224
Cadence Design Systems Inc	–	–	–	403	–	125,970	111,226
Caesars Entertainment Inc	–	–	–	2,000	–	46,780	60,062
Carvana Co	–	–	–	335	–	141,377	89,965
Caterpillar Inc	–	–	–	504	–	288,726	283,885
CBRE Group Inc	–	–	–	2,998	–	482,048	436,722
Cencora Inc	–	–	–	471	–	159,080	136,718

The information in this schedule has been certified as to its completeness and accuracy by the custodian and trustee.

Profit Sharing Plan of MNS, Ltd.

Form 5500, Schedule H, Line 4i – Schedule of Assets (Held at End of Year)

December 31, 2025

Supplemental Schedule II

Identity of Issue, Borrower, Lessor or Similar Party	Maturity Date	Interest Rate	Collateral	Shares or Units	Par or Maturity Value	Current Value	Cost
Charles Schwab Corporation	–	–	–	16,695	–	1,667,997	1,018,611
Chemed Corp	–	–	–	200	–	85,572	4,749
Chevron Corp	–	–	–	6,238	–	950,734	690,005
Chubb Ltd	–	–	–	1,776	–	554,325	519,403
Cincinnatti Financial Corp	–	–	–	4,143	–	676,635	185,097
Cisco Systems Inc	–	–	–	12,138	–	934,990	256,869
Cloudflare Inc Class A	–	–	–	598	–	117,896	107,185
Cms Energy Corp	–	–	–	1,500	–	104,895	11,461
CNH Indl NV Shs	–	–	–	12,000	–	110,640	109,260
Cohen & Steers Inc	–	–	–	1,200	–	75,336	24,697
Coinbase Global Inc -Class A	–	–	–	420	–	94,979	132,396
Comcast Corp CL A	–	–	–	4,000	–	119,560	58,712
Comfort Systems USA Inc	–	–	–	175	–	163,326	165,482
Constellation Energy Corp	–	–	–	815	–	287,915	203,911
Corning Inc	–	–	–	20,622	–	1,805,662	966,882
Costco Wholesale Corp-New	–	–	–	334	–	288,022	150,635
Crane Co	–	–	–	1,000	–	184,430	13,027
Crane Nxt Co	–	–	–	200	–	9,414	1,386
Crown Castle Inc	–	–	–	4,799	–	426,487	599,434
Cummins Inc	–	–	–	2,030	–	1,036,214	852,272
CVS Health Corp	–	–	–	600	–	47,616	20,021
Danone Spons ADR	–	–	–	4,000	–	72,160	41,621
Deere & Co.	–	–	–	800	–	372,456	24,202
Dentsply Sirona Inc	–	–	–	1,600	–	18,288	27,056
Dominion Energy Inc	–	–	–	17,669	–	1,035,227	1,130,491
Doordash Inc A	–	–	–	1,111	–	251,619	138,216
Edgewell Personal Care Co	–	–	–	5,000	–	85,250	199,561
Edwards Lifesciences	–	–	–	1,542	–	131,456	133,221
Eli Lilly & Company	–	–	–	886	–	952,166	414,927
Energizer Holdings Inc	–	–	–	6,000	–	119,340	176,173
Enpro Inc	–	–	–	900	–	192,717	55,973

The information in this schedule has been certified as to its completeness and accuracy by the custodian and trustee.

Profit Sharing Plan of MNS, Ltd.

Form 5500, Schedule H, Line 4i – Schedule of Assets (Held at End of Year)

December 31, 2025

Supplemental Schedule II

Identity of Issue, Borrower, Lessor or Similar Party	Maturity Date	Interest Rate	Collateral	Shares or Units	Par or Maturity Value	Current Value	Cost
EQT Corp	–	–	–	3,331	–	178,542	190,207
Exxon-Mobil Corporation	–	–	–	1,226	–	147,537	92,715
Fair Isaac Inc	–	–	–	87	–	147,084	157,134
Fastenal Co	–	–	–	18,263	–	732,894	261,060
Ferrari NV	–	–	–	339	–	125,281	136,174
FirstEnergy Corp	–	–	–	800	–	35,816	17,229
Flowers Foods Inc	–	–	–	6,000	–	65,280	10,156
Flowserve Corp	–	–	–	6,000	–	416,280	174,470
Fortune Brands Innovations Inc	–	–	–	1,000	–	50,020	6,151
Fox Corp Class B	–	–	–	4,000	–	259,720	114,642
GATX Corp	–	–	–	1,000	–	169,600	37,220
GCI Liberty Inc C	–	–	–	70	–	2,605	1,322
GE Healthcare Technologies Inc	–	–	–	1	–	82	99
GE Vernova Inc	–	–	–	239	–	156,203	110,539
General Electric Co	–	–	–	2,791	–	859,712	484,385
General Mills	–	–	–	1,000	–	46,500	23,654
Goldman Sachs Group Inc	–	–	–	476	–	418,404	191,965
Gorman-Rupp Co	–	–	–	1,200	–	57,300	42,198
Graco Inc	–	–	–	2,200	–	180,334	42,431
Graham Corp	–	–	–	800	–	51,384	25,432
Greif Inc – A	–	–	–	2,200	–	148,940	24,019
Hartford Insurance Group Inc	–	–	–	100	–	13,780	3,926
Henry Schein Inc	–	–	–	3,000	–	226,740	34,083
Herc Holdings Inc	–	–	–	2,400	–	356,112	64,395
Hilton Worldwide Holdings Inc	–	–	–	592	–	170,052	87,091
Honeywell International	–	–	–	1,200	–	234,108	23,510
Howmet Aerospace Inc	–	–	–	835	–	171,192	104,211
Hyster-Yale Inc	–	–	–	800	–	23,768	36,682
Ingredion Inc	–	–	–	800	–	88,208	11,057
Innovex International Inc	–	–	–	11,500	–	251,505	284,672
Int'l Flavors & Fragrances	–	–	–	2,000	–	134,780	90,450

The information in this schedule has been certified as to its completeness and accuracy by the custodian and trustee.

Profit Sharing Plan of MNS, Ltd.

Form 5500, Schedule H, Line 4i – Schedule of Assets (Held at End of Year)

December 31, 2025

Supplemental Schedule II

Identity of Issue, Borrower, Lessor or Similar Party	Maturity Date	Interest Rate	Collateral	Shares or Units	Par or Maturity Value	Current Value	Cost
ITT Inc	–	–	–	1,000	–	173,510	18,288
Johnson & Johnson	–	–	–	5,196	–	1,075,312	701,560
Johnson Controls International PLC	–	–	–	2,706	–	324,044	182,813
JPMorgan Chase & Co	–	–	–	2,550	–	821,661	337,922
Lam Research Corp	–	–	–	1,486	–	254,373	136,696
Lennar Corp – B	–	–	–	2,300	–	218,776	100,845
Liberty Broadband – A	–	–	–	400	–	19,312	24,163
Liberty Broadband – C	–	–	–	127	–	6,172	1,452
Liberty Capital Corp	–	–	–	80	–	2,950	1,630
Liberty Global Ltd CL C	–	–	–	4,000	–	44,160	35,244
Liberty Live Holdings Inc Ser A	–	–	–	125	–	10,188	502
Liberty Live Holdings Inc Ser C	–	–	–	285	–	23,701	2,760
Lifeway Foods Inc	–	–	–	1,400	–	33,922	31,977
Live Nation Entertainment Inc	–	–	–	1,117	–	159,173	122,890
Lowes Co Inc	–	–	–	3,874	–	934,254	236,339
LPL Financial Holdings Inc	–	–	–	288	–	102,865	100,546
Madison Square Garden Entertainment CL A	–	–	–	1,000	–	53,890	12,659
Madison Square Garden Sports Corp	–	–	–	1,200	–	310,380	111,255
Mastercard Inc A	–	–	–	441	–	251,758	161,472
Matthews Intl. Corp. Cl A	–	–	–	4,500	–	117,540	103,026
McDonalds Corp	–	–	–	790	–	241,448	216,022
Mckesson Corp	–	–	–	719	–	589,789	450,098
Mercadolibre Inc	–	–	–	72	–	145,027	115,102
Meta Platforms Inc	–	–	–	1,139	–	751,843	414,015
MGM Resorts International	–	–	–	2,000	–	72,980	53,297
Micron Tech. Inc.	–	–	–	1,100	–	313,951	90,649
Microsoft Corporation	–	–	–	7,258	–	3,510,114	1,027,729
Millicom Intl Cellular S.A.	–	–	–	2,000	–	110,880	47,103
Millrose Properties Cl A	–	–	–	800	–	23,896	5,812
Mondelez International Inc	–	–	–	600	–	32,298	11,428
Monolithic Power Sys Inc	–	–	–	187	–	169,489	86,113

The information in this schedule has been certified as to its completeness and accuracy by the custodian and trustee.

Profit Sharing Plan of MNS, Ltd.

Form 5500, Schedule H, Line 4i – Schedule of Assets (Held at End of Year)

December 31, 2025

Supplemental Schedule II

Identity of Issue, Borrower, Lessor or Similar Party	Maturity Date	Interest Rate	Collateral	Shares or Units	Par or Maturity Value	Current Value	Cost
Monro Inc	–	–	–	2,500	–	50,100	37,411
Morgan Stanley	–	–	–	1,160	–	205,935	201,273
Mueller Inds Inc	–	–	–	2,000	–	229,600	27,810
Natera Inc	–	–	–	593	–	135,850	67,782
National Fuel Gas	–	–	–	3,200	–	256,192	154,134
National Presto Inds	–	–	–	900	–	96,084	71,479
Netflix Inc	–	–	–	2,030	–	190,333	191,901
Newmont Corp	–	–	–	1,000	–	99,850	45,400
Nintendo Ltd Adr New Japan	–	–	–	56,480	–	952,253	753,775
Norfolk Southern Co.	–	–	–	4,927	–	1,422,523	773,853
Northern Trust Corp	–	–	–	500	–	68,295	25,889
Northrop Grumman Corp	–	–	–	1,407	–	802,285	588,464
Nvidia Corp	–	–	–	15,801	–	2,946,887	675,092
Oracle Corp	–	–	–	693	–	135,073	113,667
Palantir Technologies Inc A	–	–	–	486	–	86,387	86,159
Palo Alto Networks Inc	–	–	–	854	–	157,307	95,002
Paychex Inc	–	–	–	5,366	–	601,958	205,896
Paypal Holdings Inc	–	–	–	400	–	23,352	12,711
Pfizer Incorporated	–	–	–	2,000	–	49,800	55,833
Philip Morris International	–	–	–	7,662	–	1,228,985	692,053
Pnc Financial Svc Group	–	–	–	500	–	104,365	59,820
Procter & Gamble Co	–	–	–	500	–	71,655	16,250
Progressive Corp	–	–	–	4,394	–	1,000,602	428,598
Quanta Svcs Inc	–	–	–	402	–	169,668	86,361
Reddit Inc CL A	–	–	–	570	–	131,026	131,686
Resideo Technologies Inc	–	–	–	666	–	23,390	2,584
Robinhood Markets Inc – A	–	–	–	1,488	–	168,293	57,672
Rollins Inc	–	–	–	2,386	–	143,208	115,305
Royal Caribbean Cruises Ltd Is	–	–	–	995	–	277,525	258,132
RTX Corp	–	–	–	2,960	–	542,864	314,238
Ryman Hospitality Properties	–	–	–	2,500	–	236,550	50,202

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Profit Sharing Plan of MNS, Ltd.

Form 5500, Schedule H, Line 4i – Schedule of Assets (Held at End of Year)

December 31, 2025

Supplemental Schedule II

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Salesforce Inc	–	–	–	400	–	105,964	103,786
Scotts Miracle-Gro Co Cl A	–	–	–	1,000	–	58,350	58,642
Scripps E W Co Ohio Cl A	–	–	–	4,000	–	15,960	41,702
Sensient Tech Corp	–	–	–	500	–	46,975	10,293
Shopify Inc A	–	–	–	1,317	–	211,997	175,724
Sirius XM Holdings Inc	–	–	–	1,373	–	27,453	3,262
SLB Ltd	–	–	–	1,500	–	57,570	58,308
Smucker J. M. Co. New	–	–	–	1,000	–	97,810	103,776
Snowflake Inc-Class A	–	–	–	631	–	138,416	147,668
Solstice Advanced Materials Inc	–	–	–	300	–	14,574	1,472
Sony Corp ADR New	–	–	–	10,000	–	256,000	48,478
Sony Financial Group Inc Spon ADS	–	–	–	7,400	–	38,702	-
Sphere Entertainment Co CL A	–	–	–	1,400	–	133,112	23,450
Spotify Technology Sa	–	–	–	428	–	248,544	206,605
Standard Motor Prods	–	–	–	1,200	–	44,220	35,153
Starbucks Corp.	–	–	–	7,728	–	650,775	675,042
State Street Corp	–	–	–	3,000	–	387,030	135,616
Strattec Security Corp	–	–	–	1,000	–	76,140	33,474
Symbotic Inc Class A	–	–	–	1,765	–	105,018	98,580
T-Mobile USA Inc	–	–	–	702	–	142,534	100,166
Taiwan Semiconductor-Sp ADR	–	–	–	746	–	226,702	139,187
Take Two Interactive	–	–	–	1,906	–	487,993	356,430
TE Connectivity LTD	–	–	–	5,168	–	1,175,772	701,358
TEGNA Inc	–	–	–	3,000	–	58,230	46,993
Telephone & Data Sys	–	–	–	3,000	–	123,000	83,234
Telesat Corp CL A & CL B Shs	–	–	–	4,500	–	130,950	60,496
Tesla Inc	–	–	–	885	–	398,002	288,068
Texas Instruments Inc	–	–	–	5,475	–	949,858	591,995
Textron Inc	–	–	–	4,500	–	392,265	193,961
The Bank of New York Mellon Corp	–	–	–	1,000	–	116,090	26,752
The Campbell's Company	–	–	–	4,500	–	125,415	126,913

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December 31, 2025

Supplemental Schedule II

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TKO Group Holdings Inc CL A	–	–	–	928	–	193,952	117,090
Toro Co	–	–	–	1,500	–	118,080	112,152
Ul Solutions Inc – Class A	–	–	–	2,529	–	199,437	182,235
United Rentals Inc	–	–	–	163	–	131,919	155,468
UnitedHealth Group Inc	–	–	–	2,791	–	921,337	953,928
Vertiv Holdings LLC	–	–	–	816	–	132,200	140,628
Viking Holdings Ltd	–	–	–	1,864	–	133,108	59,480
Vistra Corp	–	–	–	800	–	129,064	131,896
Vulcan Matls Co	–	–	–	548	–	156,301	161,785
Walmart Inc	–	–	–	5,403	–	601,948	387,903
Watts Water Technologies-A	–	–	–	400	–	110,408	6,356
Wells Fargo & Co New	–	–	–	500	–	46,600	15,881
Wynn Resorts Ltd	–	–	–	900	–	108,297	83,421
Xylem	–	–	–	300	–	40,854	7,764
Zimmer Biomet Holdings Inc	–	–	–	1,000	–	89,913	54,899
Total Common Stock						**70,326,339**	**39,872,835**
Corporate Bonds							
Abbvie Inc	3/15/2031	4.950 %	–	–	40,000	41,407	40,032
AEP Transmission Co LLC	4/1/2050	3.650 %	–	–	75,000	55,813	60,778
AEP Transmission Co LLC	3/15/2053	5.400 %	–	–	30,000	29,316	30,512
Amcor Group Finance	5/23/2029	5.450 %	–	–	95,000	98,459	95,774
Amgen Inc	3/2/2053	5.650 %	–	–	75,000	73,756	73,897
Anheuser-Busch Co/Inbev	2/1/2046	4.900 %	–	–	95,000	88,200	93,414
Apple Inc	5/11/2050	2.650 %	–	–	22,000	13,818	20,079
Arthur J Gallagher & Co	2/15/2055	5.550 %	–	–	45,000	43,359	42,039
AT&T Inc	6/1/2051	3.650 %	–	–	110,000	77,747	108,726
AT&T Inc	9/15/2053	3.500 %	–	–	60,000	40,366	40,826
AT&T Inc	12/1/2057	3.800 %	–	–	175,000	120,923	125,976
Atmos Energy Corp	12/15/2054	5.000 %	–	–	45,000	41,063	43,791
Bank of America Corp	1/24/2031	5.162 %	–	–	290,000	299,698	290,541

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Profit Sharing Plan of MNS, Ltd.

Form 5500, Schedule H, Line 4i – Schedule of Assets (Held at End of Year)

December 31, 2025

Supplemental Schedule II

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Bank of America Corp	2/12/2036	5.744 %	–	–	70,000	73,124	70,000
Baxter International Inc	2/15/2029	4.450 %	–	–	50,000	50,149	49,966
Boeing Co	5/1/2050	5.805 %	–	–	125,000	123,613	121,025
Boeing Co/The	5/1/2034	6.528 %	–	–	140,000	155,322	155,108
Bristol-Myers Squibb Co	2/22/2054	5.550 %	–	–	40,000	39,464	39,086
Broadcom Inc	10/15/2030	4.200 %	–	–	180,000	180,117	179,814
Broadcom Inc	7/15/2035	5.200 %	–	–	80,000	82,170	79,867
Charter Comm Opt LLC/Cap	6/1/2034	6.550 %	–	–	115,000	121,143	119,170
Cheniere Energy Partners	10/1/2029	4.500 %	–	–	100,000	100,354	98,376
Citibank Na	5/29/2027	4.576 %	–	–	300,000	303,095	300,000
Citigroup Inc	9/11/2031	4.503 %	–	–	50,000	50,283	50,000
Citigroup Inc	9/11/2036	5.174 %	–	–	45,000	45,564	45,000
Comcast Corp	5/15/2053	5.350 %	–	–	30,000	27,632	27,366
Con Edison Co Of NY Inc	3/15/2055	5.500 %	–	–	40,000	38,998	39,553
Constellation Brands Inc	5/1/2030	4.800 %	–	–	190,000	193,610	189,670
Consumers 23 Secure Fund	3/1/2027	5.550 %	–	–	107,699	108,802	107,689
CVS Health Corp	9/15/2035	5.450 %	–	–	95,000	99,186	96,585
CVS Health Corp	3/25/2048	5.050 %	–	–	95,000	84,065	82,846
DTE Electric Co	3/1/2034	5.200 %	–	–	110,000	113,706	111,802
Duke Energy Carolinas	1/15/2053	5.350 %	–	–	160,000	153,805	158,954
Duke Energy NC St Fdg II	7/1/2035	4.226 %	–	–	315,000	314,496	314,994
Enterprise Products Oper	1/31/2050	4.200 %	–	–	85,000	68,452	79,897
Essex Portfolio LP	4/1/2034	5.500 %	–	–	95,000	98,598	97,001
Florida Power & Light Co	3/15/2055	5.700 %	–	–	45,000	45,852	43,871
General Motors Finl Co	1/7/2030	5.350 %	–	–	120,000	123,962	119,860
Georgia Power Co	10/1/2028	4.000 %	–	–	80,000	80,337	79,960
Global Payments Inc	11/15/2030	4.875 %	–	–	75,000	75,224	74,977
Goldman Sachs Group Inc	1/28/2036	5.536 %	–	–	40,000	41,630	40,009
GSK Consumer Healthcare	3/24/2032	3.625 %	–	–	30,000	28,587	27,225
Healthcare Realty Trust	3/15/2030	2.400 %	–	–	10,000	8,884	9,283
Healthcare Trust Of Amer	8/1/2026	3.500 %	–	–	45,000	44,841	44,761

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December 31, 2025

Supplemental Schedule II

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Healthcare Trust Of Amer	7/1/2027	3.750 %	–	–	190,000	188,913	188,726
Healthcare Trust Of Amer Hldgs Glbl Nt	3/15/2030	2.400 %	–	–	35,000	31,839	31,642
Honeywell International	3/1/2054	5.250 %	–	–	40,000	37,958	39,977
Interstate Power & Light	6/29/2035	5.600 %	–	–	50,000	52,193	49,851
JPMorgan Chase & Co	4/22/2031	5.103 %	–	–	245,000	253,516	247,208
JPMorgan Chase & Co	4/22/2036	5.572 %	–	–	285,000	299,754	287,596
Kellanova	5/15/2028	4.300 %	–	–	75,000	75,499	75,415
Kellanova	3/1/2033	5.250 %	–	–	165,000	171,559	168,854
Kellanova	5/16/2054	5.750 %	–	–	135,000	136,025	132,683
Kraft Heinz Foods Co	7/15/2045	5.200 %	–	–	35,000	32,216	32,314
Kraft Heinz Foods Co	6/1/2050	5.500 %	–	–	30,000	28,139	28,297
Kroger Co	9/15/2034	5.000 %	–	–	150,000	151,403	150,040
Meta Platforms Inc	11/15/2035	4.875 %	–	–	90,000	90,132	89,992
Meta Platforms Inc	11/15/2055	5.625 %	–	–	50,000	48,126	48,967
Morgan Stanley	4/17/2036	5.664 %	–	–	280,000	295,280	282,726
Northern Sts Pwr Co Minn	5/15/2035	5.050 %	–	–	115,000	117,387	114,090
Nyseg Storm Funding LKC	5/1/2032	4.866 %	–	–	210,000	215,372	209,962
Oneok Inc	11/1/2054	5.700 %	–	–	110,000	103,000	109,522
Oracle Corp	9/26/2035	5.200 %	–	–	30,000	28,910	29,996
Oracle Corp	8/3/2055	6.000 %	–	–	30,000	26,642	27,864
O'Reilly Automotive Inc	8/19/2034	5.000 %	–	–	35,000	35,371	33,298
Reinsurance Grp Of Amer	9/15/2034	5.750 %	–	–	60,000	62,728	62,373
Targa Resources Corp	8/15/2035	5.550 %	–	–	35,000	35,950	34,645
T-Mobile USA Inc	5/15/2032	5.125 %	–	–	105,000	108,219	104,876
T-Mobile USA Inc	5/15/2035	5.300 %	–	–	60,000	61,699	59,867
Totalenergies Capital Sa	4/5/2054	5.488 %	–	–	35,000	34,007	33,775
UnitedHealth Group Inc	2/15/2033	5.350 %	–	–	75,000	78,196	76,739
UnitedHealth Group Inc	7/15/2044	5.500 %	–	–	80,000	79,662	77,081
UnitedHealth Group Inc	4/15/2053	5.050 %	–	–	50,000	45,369	44,357
Ventas Realty LP	1/15/2035	5.000 %	–	–	125,000	125,529	122,339
Virginia Power Fuel Sec	5/1/2027	5.088 %	–	–	72,147	72,626	72,146

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December 31, 2025

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Waste Management Inc	3/15/2035	4.950 %	–	–	95,000	96,864	93,607
Wells Fargo & Company	4/23/2031	5.615 %	–	–	35,000	36,194	34,998
Wells Fargo & Company	04/23/2036	5.605 %	–	–	80,000	84,073	81,687
Total Corporate Bonds						**7,439,340**	**7,397,610**
U.S. Government Agency Securities							
Fannie Mae 932888	1/1/2041	3.500 %	–	–	24,193	23,388	25,096
Fannie Mae Al3209	9/1/2031	4.500 %	–	–	7,436	7,475	8,112
Fannie Mae At2127	4/1/2043	3.000 %	–	–	33,197	30,745	35,256
Fannie Mae Aw1544	3/1/2029	4.000 %	–	–	4,487	4,473	4,862
Fannie Mae Bm1277	5/1/2047	4.000 %	–	–	44,413	42,998	45,656
Fannie Mae Bm4581	9/1/2033	4.000 %	–	–	26,912	26,951	27,488
Fannie Mae Bm5839	11/01/2047	3.500 %	–	–	5,720	5,458	6,015
Fannie Mae Bm6038	1/1/2045	4.000 %	–	–	6,695	6,527	7,117
Fannie Mae Ca6414	7/1/2050	3.000 %	–	–	306,812	278,149	330,398
Fannie Mae Cb2795	2/1/2052	3.000 %	–	–	90,465	80,360	78,394
Fannie Mae Cb2804	2/1/2052	2.500 %	–	–	203,743	175,518	186,234
Fannie Mae Cb3905	6/1/2052	3.500 %	–	–	38,729	35,973	34,366
Fannie Mae Fm1108	11/1/2044	5.000 %	–	–	19,767	20,348	21,515
Fannie Mae Fm1175	5/1/2047	4.500 %	–	–	59,993	60,454	64,516
Fannie Mae Fm1652	7/1/2044	3.500 %	–	–	95,668	91,923	100,818
Fannie Mae Fs0522	2/1/2052	2.500 %	–	–	112,509	96,644	96,301
Fannie Mae Fs1533	4/1/2052	3.000 %	–	–	38,022	34,133	36,287
Fannie Mae Fs5848	12/1/2051	2.500 %	–	–	33,757	28,859	28,103
Fannie Mae Fs7299	12/1/2051	3.000 %	–	–	16,231	14,568	14,060
Fannie Mae Ma0232	11/01/2029	4.500 %	–	–	12,130	12,179	12,621
Fannie Mae Ma0457	7/1/2030	4.000 %	–	–	2,148	2,141	2,211
Fannie Mae Ma0461	7/1/2030	4.500 %	–	–	3,095	3,111	3,240
Fannie Mae Ma0530	8/1/2030	5.000 %	–	–	3,789	3,852	4,188
Fannie Mae Ma0563	11/01/2030	4.000 %	–	–	4,386	4,377	4,561
Fannie Mae Ma0737	5/1/2026	4.500 %	–	–	168	168	181

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December 31, 2025

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Fannie Mae Ma1688	12/01/2033	3.500 %	–	–	22,046	21,632	23,431
Fannie Mae Ma3007	4/1/2047	3.000 %	–	–	33,578	30,500	33,557
Fannie Mae Ma4579	4/1/2052	3.000 %	–	–	892,446	793,272	769,844
Fannie Mae Ma4600	5/1/2052	3.500 %	–	–	34,602	32,129	32,029
Fannie Mae Ma4644	5/1/2052	4.000 %	–	–	70,206	67,008	69,878
Fannie Mae Ma4655	7/1/2052	4.000 %	–	–	485,049	463,531	469,079
Fannie Mae Ma4684	6/1/2052	4.500 %	–	–	448,511	440,222	443,254
Fannie Mae Ma4732	9/1/2052	4.000 %	–	–	441,376	421,077	416,534
Fannie Mae Ma4733	9/1/2052	4.500 %	–	–	412,339	404,675	387,919
Fannie Mae Ma4761	9/1/2052	5.000 %	–	–	7,375	7,395	7,193
Fannie Mae Ma4783	10/1/2052	4.000 %	–	–	122,416	116,806	114,664
Fannie Mae Ma4785	10/01/2052	5.000 %	–	–	354,489	355,982	350,271
Fannie Mae Ma4918	2/1/2053	5.000 %	–	–	178,415	178,854	168,801
Fannie Mae Ma4920	2/1/2053	6.000 %	–	–	90,887	93,542	91,824
Fannie Mae Ma4978	4/1/2053	5.000 %	–	–	88,072	88,280	85,107
Fannie Mae Ma5039	6/1/2053	5.500 %	–	–	250,570	255,082	246,441
Fannie Mae Ma5106	8/1/2053	5.000 %	–	–	41,566	41,632	40,599
Fannie Mae Ma5165	10/01/2053	5.500 %	–	–	355,040	361,186	349,680
Fannie Mae Ma5295	3/1/2054	6.000 %	–	–	69,414	71,315	70,130
Fannie Mae Ma5331	4/1/2054	5.500 %	–	–	178,116	180,865	176,287
Fannie Mae Ma5353	5/1/2054	5.500 %	–	–	320,213	325,138	317,099
Fannie Mae Ma5389	6/1/2054	6.000 %	–	–	160,263	164,648	163,357
FNMA Umbs Lng 30 Year 4.500	8/1/2052	4.500 %	–	–	80,997	79,500	81,212
FNMA Umbs Lng 30 Year 5.000	7/1/2052	5.000 %	–	–	65,087	65,261	66,155
Freddie Mac A95575	12/1/2040	4.000 %	–	–	3,725	3,668	4,013
Freddie Mac A95656	12/01/2040	4.000 %	–	–	2,758	2,701	2,971
Freddie Mac A95856	12/01/2040	4.000 %	–	–	3,301	3,240	3,556
Freddie Mac A95857	12/01/2040	4.000 %	–	–	12,842	12,694	13,890
Freddie Mac C91697	4/1/2033	3.500 %	–	–	31,781	31,270	33,107
Freddie Mac C91759	4/1/2034	4.500 %	–	–	7,439	7,520	8,039
Freddie Mac C91832	6/1/2035	3.500 %	–	–	14,151	13,837	14,961

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Freddie Mac G06578	6/1/2038	4.500 %	–	–	19,743	19,751	21,406
Freddie Mac G07500	10/01/2043	4.000 %	–	–	12,152	11,903	12,916
Freddie Mac G07806	6/1/2041	5.000 %	–	–	18,481	19,048	20,653
Freddie Mac G08687	1/1/2046	3.500 %	–	–	57,463	54,616	58,469
Freddie Mac G08747	2/1/2047	3.000 %	–	–	48,546	44,160	51,163
Freddie Mac G08760	4/1/2047	3.000 %	–	–	30,158	27,387	31,770
Freddie Mac G30321	3/1/2027	5.000 %	–	–	916	918	994
Freddie Mac G60145	8/1/2045	3.500 %	–	–	21,033	20,043	21,977
Freddie Mac G60761	10/1/2043	3.000 %	–	–	52,079	48,300	53,210
Freddie Mac Q00769	5/1/2041	5.000 %	–	–	13,374	13,763	14,971
Freddie Mac Q02143	7/1/2041	4.000 %	–	–	19,649	19,270	20,595
Freddie Mac Q04647	11/01/2041	3.000 %	–	–	12,907	12,411	12,992
Freddie Mac Q29245	10/01/2044	3.500 %	–	–	17,557	16,743	18,500
Freddie Mac Q32859	4/1/2045	3.500 %	–	–	19,107	18,201	20,346
Freddie Mac Q33006	4/1/2045	3.500 %	–	–	22,612	21,534	23,019
Freddie Mac Q46278	2/1/2047	3.500 %	–	–	24,705	23,347	25,446
Freddie Mac Ra6766	2/1/2052	2.500 %	–	–	127,662	109,977	108,832
Freddie Mac Ra7211	4/1/2052	4.000 %	–	–	17,968	17,174	16,797
Freddie Mac Sd8213	5/1/2052	3.000 %	–	–	215,667	191,834	183,519
Freddie Mac Sd8329	6/1/2053	5.000 %	–	–	194,364	194,772	187,220
GNMA Pass-Thru M Single Family 3.500	7/20/2052	3.500 %	–	–	91,525	84,270	89,423
Government National Mortgage A 727889	8/15/2040	4.500 %	–	–	21,863	22,241	23,204
Government National Mortgage A 749835	9/15/2040	4.500 %	–	–	100,531	101,657	106,642
Government National Mortgage A 782619	4/15/2039	5.000 %	–	–	10,902	11,223	12,081
Government National Mortgage A Bu5340	4/15/2050	3.000 %	–	–	8,872	7,993	9,265
Government National Mortgage A By0330	10/20/2050	3.000 %	–	–	3,076	2,771	3,277
Government National Mortgage A By0331	10/20/2050	3.000 %	–	–	7,908	7,124	8,417
Government National Mortgage A Ma7194	2/20/2051	3.000 %	–	–	38,655	34,850	33,762
Government National Mortgage A Ma7419	6/20/2051	3.000 %	–	–	8,269	7,455	7,088
Government National Mortgage A Ma7768	12/20/2051	3.000 %	–	–	13,633	12,291	12,014
Government National Mortgage A Ma8201	8/20/2052	4.500 %	–	–	116,241	114,285	114,380

The information in this schedule has been certified as to its completeness and accuracy by the custodian and trustee.

Profit Sharing Plan of MNS, Ltd.

Form 5500, Schedule H, Line 4i – Schedule of Assets (Held at End of Year)

December 31, 2025

Supplemental Schedule II

Identity of Issue, Borrower, Lessor or Similar Party	Maturity Date	Interest Rate	Collateral	Shares or Units	Par or Maturity Value	Current Value	Cost
Government National Mortgage A Ma8267	9/20/2052	4.000 %	–	–	117,012	111,497	110,521
Government National Mortgage A Ma8347	10/20/2052	4.500 %	–	–	27,134	26,665	26,047
Government National Mortgage A Ma8488	12/20/2052	4.000 %	–	–	12,290	11,709	11,911
Government National Mortgage A Ma8489	12/20/2052	4.500 %	–	–	27,718	27,221	26,847
Total U.S. Government Agency Securities						**7,693,638**	**7,732,147**
U.S. Treasury Obligations							
United States Treas Bds	5/15/2055	0.000 %	–	–	150,000	147,738	153,586
U.S. Treasury Note	7/31/2030	3.875 %	–	–	305,000	307,299	305,858
U.S. Treasury Note/Bond	2/15/2026	4.000 %	–	–	150,000	150,035	150,844
U.S. Treasury Note/Bond	9/15/2026	4.625 %	–	–	275,000	277,063	273,421
U.S. Treasury Note/Bond	10/31/2026	4.125 %	–	–	220,000	220,950	219,184
U.S. Treasury Note/Bond	2/29/2028	4.000 %	–	–	1,455,000	1,470,346	1,472,619
U.S. Treasury Note/Bond	6/30/2030	3.750 %	–	–	225,000	225,606	221,396
U.S. Treasury Note/Bond	7/31/2030	4.000 %	–	–	150,000	151,934	147,727
U.S. Treasury Note/Bond	8/31/2030	4.125 %	–	–	300,000	305,332	291,574
U.S. Treasury Note/Bond	2/28/2031	4.250 %	–	–	75,000	76,749	75,709
U.S. Treasury Note/Bond	5/31/2031	4.625 %	–	–	285,000	296,745	291,323
U.S. Treasury Note/Bond	3/31/2032	4.125 %	–	–	300,000	304,277	303,914
U.S. Treasury Note/Bond	5/15/2032	2.875 %	–	–	190,000	179,223	184,606
U.S. Treasury Note/Bond	2/15/2033	3.500 %	–	–	630,000	612,577	627,882
U.S. Treasury Note/Bond	2/15/2042	2.375 %	–	–	300,000	221,203	263,953
U.S. Treasury Note/Bond	5/15/2042	3.250 %	–	–	400,000	334,250	371,391
U.S. Treasury Note/Bond	5/15/2042	3.000 %	–	–	220,000	177,358	233,690
U.S. Treasury Note/Bond	8/15/2043	3.625 %	–	–	20,000	17,297	19,055
U.S. Treasury Note/Bond	2/15/2044	4.500 %	–	–	250,000	242,285	247,312
U.S. Treasury Note/Bond	5/15/2044	3.375 %	–	–	105,000	86,822	107,831
U.S. Treasury Note/Bond	8/15/2045	4.875 %	–	–	350,000	353,910	358,859
U.S. Treasury Note/Bond	11/15/2045	3.000 %	–	–	85,000	65,052	89,368
U.S. Treasury Note/Bond	2/15/2048	3.000 %	–	–	400,000	298,250	399,486
U.S. Treasury Note/Bond	8/15/2048	3.000 %	–	–	5,000	3,710	5,421

The information in this schedule has been certified as to its completeness and accuracy by the custodian and trustee.

Profit Sharing Plan of MNS, Ltd.

Form 5500, Schedule H, Line 4i – Schedule of Assets (Held at End of Year)

December 31, 2025

Supplemental Schedule II

Identity of Issue, Borrower, Lessor or Similar Party	Maturity Date	Interest Rate	Collateral	Shares or Units	Par or Maturity Value	Current Value	Cost
U.S. Treasury Note/Bond	11/15/2048	3.375 %	–	–	200,000	158,563	194,781
U.S. Treasury Note/Bond	5/15/2049	2.875 %	–	–	35,000	25,167	41,807
U.S. Treasury Note/Bond	8/15/2049	2.250 %	–	–	140,000	88,025	152,042
U.S. Treasury Note/Bond	2/15/2050	2.000 %	–	–	89,000	52,308	102,016
U.S. Treasury Note/Bond	8/15/2050	1.375 %	–	–	190,000	93,679	146,161
U.S. Treasury Note/Bond	5/15/2051	2.375 %	–	–	185,000	116,868	200,816
U.S. Treasury Note/Bond	11/15/2051	1.875 %	–	–	800,000	443,375	714,727
U.S. Treasury Note/Bond	11/15/2052	4.000 %	–	–	345,000	299,827	367,600
U.S. Treasury Notes	7/15/2026	4.500 %	–	–	275,000	276,477	274,377
U.S. Treasury Notes	6/30/2030	3.875 %	–	–	305,000	307,347	303,952
U.S. Treasury Notes	6/30/2032	4.125 %	–	–	215,000	216,369	214,622
U.S. Treasury Notes	11/30/2032	3.750 %	–	–	395,000	390,711	391,312
U.S. Treasury When Issued Note/Bond	3/31/2030	3.875 %	–	–	970,000	982,542	972,885
U.S. Treasury When Issued Note/Bond	4/30/2030	3.875 %	–	–	455,000	458,661	450,166
U.S. Treasury When Issued Note/Bond	5/15/2034	4.625 %	–	–	432,500	442,400	436,076
U.S. Treasury When Issued Note/Bond	8/15/2034	4.125 %	–	–	270,000	266,034	270,643
U.S. Treasury When Issued Note/Bond	2/15/2035	4.375 %	–	–	295,000	306,454	303,262
U.S. Treasury When Issued Note/Bond	5/15/2054	4.750 %	–	–	165,000	159,238	176,247
Total U.S. Treasury Obligations						**11,610,056**	**12,529,501**
Asset-Backed Securities							
American Express Credit Account Master Trust	4/15/2030	4.250 %	–	–	300,000	303,590	299,995
BMW Vehicle Lease Trust 2025-1 A3	6/26/2028	4.430 %	–	–	305,000	307,681	306,859
Carvana Auto Receivables Trust 2022-P3 A3	11/10/2027	4.610 %	–	–	23,040	23,067	23,036
CNH Equipment Trust 2024-C A3	1/15/2030	4.030 %	–	–	100,000	100,353	99,985
Ford Credit Auto Owner Trust 2024-C A3	7/15/2029	4.070 %	–	–	210,000	210,906	209,999
Ford Credit Auto Owner Trust 2024-D A3	8/15/2029	4.610 %	–	–	100,000	101,169	99,997
GM Financial Automobile Leasing 2025-1 A3	2/21/2028	4.660 %	–	–	300,000	302,528	301,031
GM Financial Securitized Term 2023-3 A3	6/16/2028	5.450 %	–	–	30,926	31,150	30,925
Morgan Stanley Pvt Bank	11/17/2028	4.204 %	–	–	320,000	321,117	320,537
Morgan Stanley Pvt Bank	11/19/2031	4.465 %	–	–	370,000	371,465	370,471

The information in this schedule has been certified as to its completeness and accuracy by the custodian and trustee.

Profit Sharing Plan of MNS, Ltd.

Form 5500, Schedule H, Line 4i – Schedule of Assets (Held at End of Year)

December 31, 2025

Supplemental Schedule II

Identity of Issue, Borrower, Lessor or Similar Party	Maturity Date	Interest Rate	Collateral	Shares or Units	Par or Maturity Value	Current Value	Cost
Honda Auto Receivables Owner T 2025-2 A3	10/15/2029	4.150 %	–	–	194,000	195,400	193,978
Volkswagen Auto Lease Trust 2024-A A3	6/21/2027	5.210 %	–	–	300,000	301,932	303,035
Total Asset-Backed Securities						**2,570,358**	**2,559,848**
Real Estate Mortgage Investment Conduits							
Bank 2017-Bnk8 A4	11/15/2050	3.488 %	–	–	80,000	78,295	71,659
Benchmark Mortgage Trust 2018-B4 A5	7/15/2061	4.121 %	–	–	175,000	174,298	170,406
Citigroup Commercial Mortgage 2019-Gc41 As	8/10/2056	3.018 %	–	–	340,000	314,747	343,759
Citigroup Commercial Mortgage 2019-Gc43 A4	11/10/2052	3.038 %	–	–	203,000	191,623	218,273
Citigroup Commercial Mortgage 2019-Gc43 As	11/10/2052	3.300 %	–	–	190,000	176,726	195,692
DBGS Mortgage Trust 2018-C1 A4	10/15/2051	4.466 %	–	–	155,000	155,171	167,495
GS Mortgage Securities Trust 2017-Gs5 Aab	3/10/2050	3.467 %	–	–	19,634	19,541	20,577
GS Mortgage Securities Trust 2017-Gs6 A3	5/10/2050	3.433 %	–	–	175,000	173,047	155,928
GS Mortgage Securities Trust 2019-Gsa1 As	11/10/2052	3.340 %	–	–	70,000	66,411	64,682
JP Morgan Chase Commercial Mor 2017-Jp5 A5	3/15/2050	3.723 %	–	–	200,000	198,834	202,234
JPMDB Commercial Mortgage Secu 2017-C5 A5	3/15/2050	3.694 %	–	–	175,000	173,076	168,608
Morgan Stanley Baml Trust 2015-C22 A4	4/15/2048	3.306 %	–	–	28,739	28,308	28,547
Morgan Stanley Capital I Trust 2016-Ubs9 A4	3/15/2049	3.594 %	–	–	6,120	6,107	5,711
Wells Fargo Commercial Mortgage 2016-C33 A4	3/15/2059	3.426 %	–	–	34,947	34,862	34,571
Total Real Estate Mortgage Investment Conduits						**1,791,046**	**1,848,142**
Municipal Bonds							
San Diego Cnty CA Regl Arpt Au Txbl-Senior-Consol Rental Car	7/1/2043	5.594 %	–	–	165,000	163,586	184,962
Total Municipal Bonds						**163,586**	**184,962**
Guaranteed Group Annuity Contracts							
New York Life Anchor Account 35	–	–	–	759,987	–	759,987	***
AUL GTD Benefit Unallocated Grp Retirement Annuity E **	–	–	–	3,119,594	–	3,979,483	***
Total Guaranteed Group Annuity Contracts						**4,739,470**	***

The information in this schedule has been certified as to its completeness and accuracy by the custodian and trustee.

Profit Sharing Plan of MNS, Ltd.

Form 5500, Schedule H, Line 4i – Schedule of Assets (Held at End of Year)

December 31, 2025

Supplemental Schedule II

Identity of Issue, Borrower, Lessor or Similar Party	Maturity Date	Interest Rate	Collateral	Shares or Units	Par or Maturity Value	Current Value	Cost
Notes Receivable From Participants							
Participant Loans **	2026 to 2035*	3.25 % to 8.50 %	Vested interest in the plan	–	–	5,584,542	5,584,542
Total Notes Receivable From Participants						**5,584,542**	**5,584,542**

* Payment schedule fully amortized with no balloon payment.

** Party-in-interest.

*** Cost information for participant-directed investments is not required to be included.

**** Cost information includes both participant-directed and nonparticipant-directed investment balances.

The information in this schedule has been certified as to its completeness and accuracy by the custodian and trustee.

Profit Sharing Plan of MNS, Ltd.

Form 5500, Schedule H, Line 4i – Schedule of Assets (Acquired and Disposed of Within Year)

Year Ended December 31, 2025

Supplemental Schedule III

Employer Identification Number: 71-1007574
Plan Number: 001

Identity of Issue, Borrower, Lessor or Similar Party	Maturity Date	Interest Rate	Collateral	Shares or Units	Par or Maturity Value	Cost of Acquisitions	Proceeds of Dispositions
Corporate Bonds							
AEP Transmission Co LLC Sr Glbl	6/15/2035	5.375 %	–	–	$ 25,000	$ 24,856	$ 24,898
Alphabet Inc	11/15/2030	4.100 %	–	–	70,000	69,974	70,403
Arthur J Gallagher & Co	2/15/2035	5.150 %	–	–	50,000	48,747	49,064
Blackstone Private Cre	1/29/2032	6.000 %	–	–	30,000	29,542	29,695
Brown & Brown Inc	6/23/2055	6.250 %	–	–	45,000	44,891	45,833
Citigroup Inc	9/29/2026	5.610 %	–	–	105,000	105,173	105,000
Citigroup Inc	1/24/2036	6.020 %	–	–	20,000	20,000	20,067
Energy Transfer LP	4/1/2030	5.200 %	–	–	30,000	29,939	30,088
Gilead Sciences Inc	6/15/2035	5.100 %	–	–	95,000	93,525	95,444
Gilead Sciences Inc	11/15/2054	5.500 %	–	–	55,000	55,580	51,923
GLP Capital LP / Fin II	6/1/2028	5.750 %	–	–	145,000	147,529	148,806
HCA Inc	3/1/2030	5.250 %	–	–	145,000	147,077	150,059
HCA Inc	3/1/2035	5.750 %	–	–	45,000	44,891	45,223
HP Enterprise Co	10/15/2029	4.550 %	–	–	75,000	73,595	73,964
HP Enterprise Co	10/15/2034	5.000 %	–	–	80,000	77,449	77,842
Intel Corp	2/10/2053	5.700 %	–	–	15,000	14,091	14,549
JPMorgan Chase & Co	1/24/2031	5.140 %	–	–	70,000	70,308	70,110
JPMorgan Chase & Co	1/24/2036	5.502 %	–	–	325,000	327,434	323,612
JPMorgan Chase & Co	7/23/2036	5.576 %	–	–	30,000	30,000	31,180
Kellogg Co	6/1/2030	2.100 %	–	–	205,000	182,359	187,870
Keurig Dr Pepper Inc	11/15/2026	4.967 %	–	–	95,000	95,000	95,089
Meta Platforms Inc	11/15/2045	5.500 %	–	–	55,000	54,899	54,071

The information in this schedule has been certified as to its completeness and accuracy by the custodian and trustee.

Profit Sharing Plan of MNS, Ltd.

Form 5500, Schedule H, Line 4i – Schedule of Assets (Acquired and Disposed of Within Year)
Year Ended December 31, 2025 **Supplemental Schedule III**

Identity of Issue, Borrower, Lessor or Similar Party	Maturity Date	Interest Rate	Collateral	Shares or Units	Par or Maturity Value	Cost of Acquisitions	Proceeds of Dispositions
Morgan Stanley	4/28/2026	2.188 %	–	–	190,000	188,977	190,000
Morgan Stanley	1/15/2031	5.230 %	–	–	210,000	210,562	210,733
Morgan Stanley	4/17/2031	5.192 %	–	–	325,000	326,550	337,077
Morgan Stanley	1/18/2036	5.587 %	–	–	140,000	140,342	139,671
Morgan Stanley Fr	7/17/2026	4.679 %	–	–	105,000	104,961	105,000
Morgan Stanley Pvt Bank	7/18/2031	4.734 %	–	–	315,000	321,322	319,007
Nisource Inc	4/1/2055	5.850 %	–	–	10,000	9,975	9,565
Oneok Inc	11/1/2034	5.050 %	–	–	75,000	70,988	72,518
Oracle Corp	8/3/2035	5.500 %	–	–	45,000	45,018	45,671
Oracle Corp	9/26/2045	5.875 %	–	–	50,000	49,977	46,301
PNC Bk N A Pittsburgh Pa Disc Sr NtA	5/13/2027	4.543 %	–	–	100,000	99,972	99,973
Prudential Financial Inc	3/14/2035	5.200 %	–	–	60,000	59,819	59,441
T-Mobile USA Inc	11/15/2055	5.875 %	–	–	30,000	29,592	30,124
UnitedHealth Group Inc	6/15/2055	5.950 %	–	–	15,000	14,849	14,954
Verisk Analytics Inc	3/15/2035	5.250 %	–	–	75,000	75,576	76,457
Verisk Analytics Inc	2/15/2036	5.125 %	–	–	70,000	69,838	69,661
Verizon Communications	5/9/2033	5.050 %	–	–	95,000	94,411	94,641
Verizon Communications	11/30/2055	5.875 %	–	–	20,000	19,921	20,134

The information in this schedule has been certified as to its completeness and accuracy by the custodian and trustee.

Profit Sharing Plan of MNS, Ltd.

Form 5500, Schedule H, Line 4j – Schedule of Reportable Transactions*

Year Ended December 31, 2025

Supplemental Schedule IV

Employer Identification Number: 71-1007574
Plan Number: 001

Identity of Issue, Borrower, Lessor or Similar Party	Description of Assets	Purchase Price (A)	Cash Receipts or Selling Price (A)	Expenses Incurred in Connection with Transaction	Cost of Assets	Current Value of Assets (B)	Net Gain
Category (i) – Single Transactions in Excess of 5% of Beginning Plan Assets							
Wilmington U.S. Government Money Mkt Instl	Mutual fund	$ -	$ 15,000,000	$ -	$ 15,000,000	$ 15,000,000	$ -
Wilmington U.S. Government Money Mkt Instl	Mutual fund	15,050,894	-	-	15,050,894	15,050,894	-
BlackRock Liq Fd Treasury Inv	Mutual fund	-	17,979,269	-	17,979,269	17,979,269	-
BlackRock Liq Fd Treasury Inv	Mutual fund	14,730,156	-	-	14,730,156	14,730,156	-
Category (iii) – Series of Transactions in Excess of 5% of Beginning Plan Assets							
Wilmington U.S. Government Money Mkt Instl	Mutual fund	$ -	$ 61,930,176 (C)	$ -	$ 61,930,176	$ 61,930,176	$ -
Wilmington U.S. Government Money Mkt Instl	Mutual fund	59,491,166 (C)	-	-	59,491,166	59,491,166	-
BlackRock Liq Fd Treasury Inv	Mutual fund	-	35,864,406 (C)	-	35,864,406	35,864,406	-
BlackRock Liq Fd Treasury Inv	Mutual fund	38,367,334 (C)	-	-	38,367,334	38,367,334	-
Fidelity® 500 Index Institutional Prem	Mutual fund	17,052,116 (C)	-	-	17,052,116	17,052,116	-

(A) Numbers within brackets indicate total number of transactions.
(B) Current value at date of transaction (trade date).
(C) Represents numerous transactions.

* Individual and series of transactions in excess of 5% of the current value of the Plan's net assets at the beginning of the year as defined in Section 2520.103-6 of the Department of Labor Rules and Regulations for Reporting and Disclosure under ERISA.

The information in this schedule has been certified as to its completeness and accuracy by the custodian and trustee.

Profit Sharing Plan of MNS, Ltd.

Form 5500, Schedule H, Line 4j – Schedule of Reportable Transactions*

Year Ended December 31, 2025

Supplemental Schedule IV

Employer Identification Number: 71-1007574
Plan Number: 001

Identity of Issue, Borrower, Lessor or Similar Party	Description of Assets	Purchase Price (A)	Cash Receipts or Selling Price (A)	Expenses Incurred in Connection with Transaction	Cost of Assets	Current Value of Assets (B)	Net Gain
Category (i) – Single Transactions in Excess of 5% of Beginning Plan Assets							
Wilmington U.S. Government Money Mkt Instl	Mutual fund	$ -	$ 15,000,000	$ -	$ 15,000,000	$ 15,000,000	$ -
Wilmington U.S. Government Money Mkt Instl	Mutual fund	15,050,894	-	-	15,050,894	15,050,894	-
BlackRock Liq Fd Treasury Inv	Mutual fund	-	17,979,269	-	17,979,269	17,979,269	-
BlackRock Liq Fd Treasury Inv	Mutual fund	14,730,156	-	-	14,730,156	14,730,156	-
Category (iii) – Series of Transactions in Excess of 5% of Beginning Plan Assets							
Wilmington U.S. Government Money Mkt Instl	Mutual fund	$ -	$ 61,930,176 (C)	$ -	$ 61,930,176	$ 61,930,176	$ -
Wilmington U.S. Government Money Mkt Instl	Mutual fund	59,491,166 (C)	-	-	59,491,166	59,491,166	-
BlackRock Liq Fd Treasury Inv	Mutual fund	-	35,864,406 (C)	-	35,864,406	35,864,406	-
BlackRock Liq Fd Treasury Inv	Mutual fund	38,367,334 (C)	-	-	38,367,334	38,367,334	-
Fidelity® 500 Index Institutional Prem	Mutual fund	17,052,116 (C)	-	-	17,052,116	17,052,116	-

(A) Numbers within brackets indicate total number of transactions.
(B) Current value at date of transaction (trade date).
(C) Represents numerous transactions.

* Individual and series of transactions in excess of 5% of the current value of the Plan's net assets at the beginning of the year as defined in Section 2520.103-6 of the Department of Labor Rules and Regulations for Reporting and Disclosure under ERISA.

The information in this schedule has been certified as to its completeness and accuracy by the custodian and trustee.

SCHEDULE H, LINE 4i, SCHEDULE OF ASSETS (HELD AT END OF YEAR)*

DECEMBER 31, 2025

*See attached financial statements with auditor's report.