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
THE COMPORIUM INC 401K AND RETIREMENT PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 01/01/1963

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)
COMPORIUM, INC.& HOME TELECOM

P.O. BOX 470
330 EAST BLACK STREET
ROCK HILL, SC 29731

2b Employer Identification Number (EIN) 57-0236160

2c Plan Sponsor's telephone number 803-326-7280

2d Business code (see instructions) 517000

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.	10/06/2026	ANDREA COOPER
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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

5	Total number of participants at the beginning of the plan year	**5**	1215
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)**	960
a(2)	Total number of active participants at the end of the plan year	**6a(2)**	864
b	Retired or separated participants receiving benefits	**6b**	13
c	Other retired or separated participants entitled to future benefits	**6c**	260
d	Subtotal. Add lines **6a(2)**, **6b**, and **6c**.	**6d**	1137
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	11
f	Total. Add lines **6d** and **6e**.	**6f**	1148
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)**	1193
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)**	1131
h	Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.	**6h**	20
7	Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

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

2E 2F 2G 2J 2K 2T 3D 3F 3H

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

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

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

a Pension Schedules

- **(1)** [X] **R** (Retirement Plan Information)
- **(2)** [ ] **MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary
- **(3)** [ ] **SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary
- **(4)** [ ] **DCG** (Individual Plan Information) – Number Attached _____
- **(5)** [ ] **MEP** (Multiple-Employer Retirement Plan Information)

b General Schedules

- **(1)** [X] **H** (Financial Information)
- **(2)** [ ] **I** (Financial Information – Small Plan)
- **(3)** [ ] **A** (Insurance Information) – Number Attached _____
- **(4)** [X] **C** (Service Provider Information)
- **(5)** [X] **D** (DFE/Participating Plan Information)
- **(6)** [ ] **G** (Financial Transaction Schedules)

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

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

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

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

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

Receipt Confirmation Code_____

SCHEDULE C (Form 5500)	Service Provider Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ **File as an attachment to Form 5500.**	**2025** **This Form is Open to Public Inspection.**

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

A Name of plan
THE COMPORIUM INC 401K AND RETIREMENT PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
COMPORIUM, INC.& HOME TELECOM

D Employer Identification Number (EIN)
57-0236160

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

FIDELITY INVESTMENTS INSTITUTIONAL

04-2647786

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

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

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

FIDELITY INVESTMENTS INSTITUTION

04-2647786

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
60 64 65	RECORDKEEPER	-25187	Yes [X] No [ ]	Yes [X] No [ ]		Yes [X] No [ ]

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

STRATEGIC ADVISORS, INC.

04-2654524

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27	ADVISOR	95270	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

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

Part I Service Provider Information (continued)

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

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

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
GS GLB CR FX INC IS - GOLDMAN SACHS 13-5108880	0.12%

(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.
TCW MW TOT RTN BD I - U.S. BANK GL	801 PENNSYLVANIA AVE, STE 219282 KANSAS CITY, MI 64105	0.10%

(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.
PIF GLB RL EST IS - PRINCIPAL SHAR	711 HIGH STREET DES MOINES, IA 50392	0.10%

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

(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: BAUKNIGHT PIETRAS & STORMER, PA	**b** EIN:	57-0940019
c	Position:		
d	Address:	**e** Telephone:	

Explanation: THERE WAS NO CHANGE IN ACCOUNTANT. FIRM NAME CHANGED EFFECTIVE 1/1/2026 DUE TO FIRM BEING ACQUIRED.

a	Name:	**b** EIN:	
c	Position:		
d	Address:	**e** Telephone:	

Explanation:

a	Name:	**b** EIN:	
c	Position:		
d	Address:	**e** Telephone:	

Explanation:

a	Name:	**b** EIN:	
c	Position:		
d	Address:	**e** Telephone:	

Explanation:

a	Name:	**b** EIN:	
c	Position:		
d	Address:	**e** Telephone:	

Explanation:

SCHEDULE D (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

DFE/Participating Plan Information

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

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

OMB No. 1210-0110

2025

This Form is Open to Public Inspection.

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

A Name of plan
THE COMPORIUM INC 401K AND RETIREMENT PLAN

B Three-digit plan number (PN) ▶ 001

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
COMPORIUM, INC.& HOME TELECOM

D Employer Identification Number (EIN)
57-0236160

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

a Name of MTIA, CCT, PSA, or 103-12 IE:	BTC US TIPS M		
b Name of sponsor of entity listed in (a):	BLACKROCK INST. TRUST COMPANY, N.A.		
c EIN-PN	45-4543968-001	**d** Entity code	C
e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	3516376		
a Name of MTIA, CCT, PSA, or 103-12 IE:	BTC LIFEPATH 2035 G		
b Name of sponsor of entity listed in (a):	BLACKROCK INST. TRUST COMPANY, N.A.		
c EIN-PN	82-3182755-001	**d** Entity code	C
e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	47261911		
a Name of MTIA, CCT, PSA, or 103-12 IE:	BTC LIFEPATH 2050 G		
b Name of sponsor of entity listed in (a):	BLACKROCK INST. TRUST COMPANY, N.A.		
c EIN-PN	82-3226904-001	**d** Entity code	C
e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	74690		
a Name of MTIA, CCT, PSA, or 103-12 IE:	BTC R2000 INDEX J		
b Name of sponsor of entity listed in (a):	BLACKROCK INST. TRUST COMPANY, N.A.		
c EIN-PN	87-4239791-001	**d** Entity code	C
e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	4344411		
a Name of MTIA, CCT, PSA, or 103-12 IE:	BTC LIFEPATH RET G		
b Name of sponsor of entity listed in (a):	BLACKROCK INST. TRUST COMPANY, N.A.		
c EIN-PN	82-3274988-001	**d** Entity code	C
e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	18860292		
a Name of MTIA, CCT, PSA, or 103-12 IE:	BTC LIFEPATH 2065 G		
b Name of sponsor of entity listed in (a):	BLACKROCK INST. TRUST COMPANY, N.A.		
c EIN-PN	84-1787954-001	**d** Entity code	C
e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	1848289		
a Name of MTIA, CCT, PSA, or 103-12 IE:	BTC LIFEPATH 2060 G		
b Name of sponsor of entity listed in (a):	BLACKROCK INST. TRUST COMPANY, N.A.		
c EIN-PN	82-3258496-001	**d** Entity code	C
e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	74818		

a Name of MTIA, CCT, PSA, or 103-12 IE: BTC US DEBT INDEX L

b Name of sponsor of entity listed in (a): BLACKROCK INST. TRUST COMPANY, N.A.

c EIN-PN 87-3119438-001	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 5080214

a Name of MTIA, CCT, PSA, or 103-12 IE: BTC LIFEPATH 2045 G

b Name of sponsor of entity listed in (a): BLACKROCK INST. TRUST COMPANY, N.A.

c EIN-PN 82-3214715-001	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 38716825

a Name of MTIA, CCT, PSA, or 103-12 IE: EMERGING MKTS II I1

b Name of sponsor of entity listed in (a): GREAT GRAY TRUST COMPANY, LLC

c EIN-PN 85-4031707-001	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 3445059

a Name of MTIA, CCT, PSA, or 103-12 IE: STABLE VALUE FUND I1

b Name of sponsor of entity listed in (a): GREAT GRAY TRUST COMPANY, LLC

c EIN-PN 85-4031707-653	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 12285687

a Name of MTIA, CCT, PSA, or 103-12 IE: BTC LIFEPATH 2040 G

b Name of sponsor of entity listed in (a): BLACKROCK INST. TRUST COMPANY, N.A.

c EIN-PN 82-3199119-001	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 419117

a Name of MTIA, CCT, PSA, or 103-12 IE: BTC LIFEPATH 2030 G

b Name of sponsor of entity listed in (a): BLACKROCK INST. TRUST COMPANY, N.A.

c EIN-PN 82-3152218-001	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1192421

a Name of MTIA, CCT, PSA, or 103-12 IE: BTC EQUITY INDEX GG

b Name of sponsor of entity listed in (a): BLACKROCK INST. TRUST COMPANY, N.A.

c EIN-PN 87-1908083-001	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 33841918

a Name of MTIA, CCT, PSA, or 103-12 IE: BTC EAFE EQ IDX M

b Name of sponsor of entity listed in (a): BLACKROCK INST. TRUST COMPANY, N.A.

c EIN-PN 45-4352742-001	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 5328725

a Name of MTIA, CCT, PSA, or 103-12 IE: BTC LIFEPATH 2055 G

b Name of sponsor of entity listed in (a): BLACKROCK INST. TRUST COMPANY, N.A.

c EIN-PN 82-3243273-001	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 7610710

a Name of MTIA, CCT, PSA, or 103-12 IE: BTC LIFEPATH 2070 G

b Name of sponsor of entity listed in (a): BLACKROCK INST. TRUST COMPANY, N.A.

c EIN-PN 99-3723891-001	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 37101

a Name of MTIA, CCT, PSA, or 103-12 IE: BTC MID CAP EQ IDX J

b Name of sponsor of entity listed in (a): BLACKROCK INST. TRUST COMPANY, N.A.

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
87-3130183-001	C	5180977

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

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

a Plan name

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

a Plan name

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

a Plan name

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

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
THE COMPORIUM INC 401K AND RETIREMENT PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
COMPORIUM, INC.& HOME TELECOM

D Employer Identification Number (EIN)
57-0236160

Part I Asset and Liability Statement

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

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)		
(2) Participant contributions	1b(2)		
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)		
(9) Value of interest in common/collective trusts	1c(9)	16172904	189119541
(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)	207336063	55484481
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)		

		(a) Beginning of Year	(b) End of Year
1d Employer-related investments:			
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
1e Buildings and other property used in plan operation	1e		
1f Total assets (add all amounts in lines 1a through 1e)	1f	223508967	244604022
Liabilities			
1g Benefit claims payable	1g		
1h Operating payables	1h		
1i Acquisition indebtedness	1i		
1j Other liabilities	1j		
1k Total liabilities (add all amounts in lines 1g through1j)	1k		
Net Assets			
1l Net assets (subtract line 1k from line 1f)	1l	223508967	244604022

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)	3871355	
(B) Participants	2a(1)(B)	6240330	
(C) Others (including rollovers)	2a(1)(C)	414458	
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		10526143
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)		
(B) U.S. Government securities	2b(1)(B)		
(C) Corporate debt instruments	2b(1)(C)		
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)		
(F) Other	2b(1)(F)		
(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		
(2) Dividends: **(A)** Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	2770322	
(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		2770322
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)		
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		
(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		19133613
(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)		14961330
c Other income	2c		
d Total income. Add all **income** amounts in column (b) and enter total	2d		47391408
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	26226270	
(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)		26226270
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses:			
(1) Salaries and allowances	2i(1)		
(2) Contract administrator fees	2i(2)		
(3) Recordkeeping fees	2i(3)	-25187	
(4) IQPA audit fees	2i(4)		
(5) Investment advisory and investment management fees	2i(5)	95270	
(6) Bank or trust company trustee/custodial fees	2i(6)		
(7) Actuarial fees	2i(7)		
(8) Legal fees	2i(8)		
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)		
(11) Other expenses	2i(11)		
(12) Total administrative expenses. Add lines **2i(1)** through **(11)**	2i(12)		70083
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		26296353
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		21095055
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: SMITH & HOWARD, PC **(2)** EIN: 58-1250486

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

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

Part IV Compliance Questions

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

During the plan year:

		Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)	**4a**		X	
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)	**4b**		X	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	**4c**		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)	**4d**		X	
e Was this plan covered by a fidelity bond?	**4e**	X		1000000
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
THE COMPORIUM INC 401K AND RETIREMENT PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
COMPORIUM, INC.& HOME TELECOM

D Employer Identification Number (EIN)
57-0236160

Part I Distributions

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

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

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

EIN(s): 04-6568107

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

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

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

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

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

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

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

6	**a** Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived)	**6a**	0
	b Enter the amount contributed by the employer to the plan for this plan year	**6b**	0
	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**	0
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**	0
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**	0

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**	0

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

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

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

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

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

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

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

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

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

☐ Yes.

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

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

☐ No. Other. Provide explanation._____

Part VII IRS Compliance Questions

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

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

☒ Design-based safe harbor method

☐ "Prior year" ADP test

☐ "Current year" ADP test

☐ N/A

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

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Financial Statements
and Supplemental Schedule

The Comporium, Inc.
401(k) and Retirement Plan

Years Ended December 31, 2025 and 2024
with Report of Independent Auditors

The Comporium, Inc. 401(k) and Retirement Plan
Financial Statements
and Supplemental Schedule
Years Ended December 31, 2025 and 2024

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SMITH+HOWARD PC

Report of Independent Auditors

Plan Administrator
The Comporium, Inc. 401(k) and Retirement Plan

Scope and Nature of the Employee Retirement Income Security Act of 1974 ("ERISA") Section 103(a)(3)(C) Audit

We have performed audits of the financial statements of The Comporium, Inc. 401(k) and Retirement Plan (the "Plan"), an employee benefit plan subject to ERISA, as permitted by ERISA Section 103(a)(3)(C) ("ERISA Section 103(a)(3)(C) audit"). The financial statements comprise the statements of net assets available for plan benefits – modified cash basis as of December 31, 2025 and 2024, and the related statements of changes in net assets available for plan benefits – modified cash basis for the years then ended, and the related notes to the financial statements.

Management, having determined it is permissible in the circumstances, has elected to have the audits of the 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 years then ended, 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 of our report:

- The amounts and disclosures in the accompanying financial statements, other than those agreed to or derived from the certified investment information, are presented fairly, in all material respects, in accordance with the modified cash basis of accounting described in Note 2 to the financial statements.

Opinion (continued)

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

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States. 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.

Emphasis of Matter – Basis of Accounting

We draw attention to Note 2 of the financial statements, which describes the basis of accounting. The financial statements were prepared using the modified cash basis of accounting, which is a basis of accounting other than generally accepted accounting principles in the United States. Our opinion is not modified with respect to that matter.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with the modified cash basis of accounting, 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.

Responsibilities of Management for the Financial Statements (continued)

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 Audits of the Financial Statements

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

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Plan's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.

Auditors' Responsibilities for the Audits of the Financial Statements (continued)

- 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 modified cash basis of accounting.

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 the modified cash basis of accounting.

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

Other Matter - Supplemental Schedule Required by ERISA

The supplemental schedule, as listed in the table of contents, is presented for purposes of additional analysis and is not a required part of the financial statements but is 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 2025 financial statements. The information included in the supplemental schedule, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audit of the 2025 financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the 2025 financial statements or to the 2025 financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States. For information included in the supplemental schedule that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

Other Matter - Supplemental Schedule Required by ERISA (continued)

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

In our opinion:

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

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

Smith & Howard, P.C

Columbia, South Carolina
September 22, 2026

The Comporium, Inc. 401(k) and Retirement Plan
Statements of Net Assets Available for Plan Benefits –
Modified Cash Basis

	December 31, 2025	2024
Assets		
Investments, at fair value:		
Mutual funds	**$ 55,484,481**	$ 207,336,063
Collective trusts	**189,119,541**	16,172,904
Total assets	**244,604,022**	223,508,967
Liabilities		
Plan liabilities	**--**	--
Net assets available for plan benefits	**$ 244,604,022**	$ 223,508,967

See accompanying notes.

The Comporium, Inc. 401(k) and Retirement Plan
Statements of Changes in Net Assets Available for Plan Benefits –
Modified Cash Basis

	Years Ended December 31, 2025	2024
Additions to net assets attributed to:		
Investment income:		
Net appreciation in fair value of investments	**$ 34,094,943**	$ 19,567,646
Dividends and interest	**2,770,322**	6,345,563
	36,865,265	25,913,209
Contributions:		
Employer	**3,871,355**	3,546,621
Employee, including rollovers	**6,654,788**	7,076,145
	10,526,143	10,622,766
Total additions	**47,391,408**	36,535,975
Deductions from net assets attributed to:		
Benefits paid to participants, including rollovers	**26,226,270**	17,540,027
Administrative expenses	**70,083**	101,715
Total deductions	**26,296,353**	17,641,742
Net changes	**21,095,055**	18,894,233
Net assets available for plan benefits, beginning	**223,508,967**	204,614,734
Net assets available for plan benefits, ending	**$ 244,604,022**	$ 223,508,967

See accompanying notes.

1. Description of Plan

Organization

Comporium, Inc. (the "Company" or "Sponsor") sponsors a "deferred profit-sharing" retirement plan and trust (the "Plan") with a 401(k) arrangement to provide retirement benefits for substantially all of its employees. The Plan has been restated and amended periodically, as necessary, to maintain its exemption from Federal income taxes under Section 501(a) of the Internal Revenue Code ("IRC"), to comply with the requirements of the Employee Retirement Income Security Act of 1974 ("ERISA"), and to help achieve business objectives of the Sponsor.

The Plan includes six majority-owned subsidiaries of the Company, including Catawba Services, Inc., Community Long Distance, Inc., Springboard Telecom, LLC, Citizens Telephone Company, IMS Solutions Group, LLC, and Chesnee Telephone Company.

Participants may refer to the Plan's documents for more complete information.

Eligibility of Participants

Employees, including part-time employees, are eligible to become participants in the 401(k) and matching portions of the Plan as soon as administratively feasible following the date on which they were hired but must be twenty-one years of age to participate. Participants who do not choose a specific deferral rate are automatically enrolled into the Plan at a deferral rate of 3% of pretax compensation, unless they opt out of participating in the Plan.

Employees become participants in the profit-sharing portion of the Plan as of the January 1 entry date preceding the date they have attained age twenty-one, and completing 1,000 hours of service during the plan year.

Participant Accounts

Individual accounts are maintained for each participant reflecting employee and employer contributions, investment income or losses, distributions, reallocations of forfeitures of non-vested portions of separated participant accounts, and plan expenses.

1. Description of Plan (continued)

Participant Accounts (continued)

Employer profit-sharing contributions are allocated among active participants in the same ratio that each active participant's compensation for the plan year bears to the total compensation of all active participants for the plan year. During the years ended December 31, 2025 and 2024, there were no profit-sharing contributions made to the Plan.

Contributions

Participants may contribute up to the legal limits allowable under the law (not to exceed 75% of their pretax compensation) to the 401(k) portion of the Plan. Participants who have attained age fifty before the end of the Plan year are eligible to make catch-up contributions. Participants may also contribute amounts representing rollover distributions from other qualified benefit plans. The Company must make up to 5% matching contributions under the Plan's safe harbor provisions. Discretionary contributions, determined annually by the Company for non-safe harbor matching and profit-sharing, may also be made to the Plan. No discretionary contributions were made to the Plan during the years ended December 31, 2025 and 2024.

Forfeitures

Participants withdrawing from the Plan with non-vested employer contributions in their accounts forfeit their share of non-vested contributions and earnings thereon. The Plan's provisions allow these amounts to be used for administrative expenses to the Plan or to reduce any employer contributions. As of December 31, 2025 and 2024, forfeited non-vested accounts totaled approximately $134,000 and $111,000, respectively. Approximately $23,000, annually, of forfeited non-vested accounts were used to reduce Plan expenses during the years ended December 31, 2025 and 2024.

Vesting

Participants are 100% vested in all employer matching contributions. Profit-sharing contributions for participants are 20% vested at the end of one year of continuous service, with additional vesting of 20% for each of the next four years, resulting in 100% vesting after the fifth year.

A participant's account is also 100% vested under the Plan upon death or disability of the participant regardless of years of service.

1. Description of Plan (continued)

Investment Options

The Plan allows individual participants, upon enrollment, to self-direct their accounts by investing in one or more mutual funds or collective trusts selected by the Plan administrator from the funds offered by fund providers selected by the Plan administrator. Participants may refer to fund provider information for a detailed description of the Plan's investment options.

Administrative Expenses

Certain administrative expenses, including recordkeeping and certain professional fees, are charged to individual participants' accounts. Any expenses not paid by the Plan are paid by the Company and are excluded from the financial statements.

Termination of the Plan

The Plan may be terminated by written instrument executed for the Company by appropriate resolution of its board of directors and conveyed to the trustee and the Plan administrator. In the event contributions are completely discontinued and the Plan is terminated, all the funds shall be administered and distributed in the manner described in the Plan. Participants who were not 100% vested in their accounts will become 100% vested at the time of Plan termination.

Payment of Benefits

Upon termination of service due to death, disability, or retirement, a participant may, subject to certain conditions, elect to receive their vested portion of Plan assets under several payout options specified in the Plan's documents. Subject to certain conditions, a participant may receive hardship withdrawals from his or her balance in the Plan while employed. Participants who have attained 59½ years of age are permitted to withdraw all or part of their vested accounts as in-service distributions. Participants automatically begin receiving distributions on April 1st of the calendar year following the year in which they have attained 73 years of age. Upon retirement or separation from the Company, vested benefits are payable in a lump-sum or certain other options as specified in the Plan.

2. Summary of Significant Accounting Policies

Financial Statement Presentation

The Plan's policy is to prepare its financial statements using the modified cash basis of accounting, which is a comprehensive basis of accounting other than accounting principles generally accepted in the United States. Under the Plan's accounting policy, contributions and investment income are recorded as received and expenses are recorded when paid.

Estimates

The preparation of financial statements in conformity with the modified cash basis of accounting requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosures of contingent assets and liabilities at the date of the financial statements and the reported amounts of changes in net assets during the reporting period. Actual results could differ from those estimates.

Investment Valuation and Income Recognition

Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See Note 4 for discussion of fair value measurements.

Purchases and sales of securities are recorded on a trade-date basis. Interest and dividends are recorded when received. Net appreciation includes the Plan's gains and losses on investments bought and sold as well as held during the year.

Risks and Uncertainties

The Plan's investment securities are exposed to various risks such as interest rate, market, and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect participants' account balances and the amounts reported in the 2025 statement of net assets available for plan benefits – modified cash basis. Actual results could differ from those estimates.

Payment of Benefits

Benefit payments are recorded when paid.

3. Trustee Certification

Information disclosed in the accompanying financial statements as of and for the years ended December 31, 2025 and 2024, related to investments, net appreciation in fair value of investments, and interest and dividends, was obtained or derived from information supplied to the Plan administrator and certified as complete and accurate by Fidelity Management Trust Company (the "Trustee").

4. Fair Value Measurements

Financial assets are reported at fair value and are classified and disclosed within a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. This hierarchy consists of three broad levels: Level 1 inputs consist of unadjusted quoted prices in active markets for identical assets and have the highest priority; Level 2 inputs consist of observable inputs other than quoted prices for identical assets; and Level 3 inputs to the valuation methodology are unobservable. The Plan uses appropriate valuation techniques based on the available inputs to measure the fair value of its investments. When available, the Plan measures fair value using Level 1 inputs because they generally provide the most reliable evidence of fair value.

The following tables present fair value measurement information for the Plan's investments:

	As of December 31, 2025			
	Quoted Market Prices (Level 1)	Significant Other Observable Inputs (Level 2)	Unobservable Inputs (Level 3)	Total at Fair Value
Mutual funds	$ 55,484,481	$ --	$ --	$ 55,484,481
Total assets in fair value hierarchy	$ 55,484,481	$ --	$ --	55,484,481
Investments measured at NAV (a)				189,119,541
Total investments				$ 244,604,022

4. Fair Value Measurements (continued)

	As of December 31, 2024			
	Quoted Market Prices (Level 1)	Significant Other Observable Inputs (Level 2)	Unobservable Inputs (Level 3)	Total at Fair Value
Mutual funds	$ 207,336,063	$ --	$ --	$ 207,336,063
Total assets in fair value hierarchy	$ 207,336,063	$ --	$ --	207,336,063
Investments measured at NAV (a)				16,172,904
Total investments				$ 223,508,967

(a) Represents collective trusts which are measured at net asset value ("NAV") as a practical expedient and are not classified in the fair value hierarchy.

Level 1 Fair Value Measurements - The fair values of mutual funds are based on quoted net asset values of the shares held by the Plan at year end.

The Plan's investments, all of which are participant directed, are reported at fair value in the accompanying financial statements. The Plan invests in the Fidelity Advisor Stable Value Portfolio , the Emerging Markets Fund II, and various BlackRock funds. These funds are collective trusts that invest in a variety of fully benefit-responsive investment contracts and mutual funds. The collective trusts are valued at NAV of units of the accounts. The NAV, as provided by the issuers, is used as a practical expedient to estimate fair value. The NAV is based on the fair value of the underlying investments held less the account's liabilities. This practical expedient is not used when it is determined to be probable that the Plan will sell the investment for an amount different than the reported NAV. Participant transactions (purchases and sales) may occur daily. Were the Plan to initiate a full redemption of any of the trusts, the account provider reserves the right to temporarily delay withdrawal from the trust in order to ensure that security liquidations will be carried out in an orderly business manner.

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

5. Party-in-Interest Transactions

At December 31, 2025 and 2024, the Plan held mutual funds managed by the Plan's trustee. Net fees for the trustee, recordkeeping, and investment advisory services amounted to approximately $70,000 and $102,000 for the years ended December 31, 2025 and 2024, respectively. These transactions qualify as party-in-interest transactions under ERISA and are exempt from the prohibited transactions rules of ERISA.

6. Filing Status

No determination letter has been received for the Plan as it operates under a volume submitter plan document. The Internal Revenue Service ("IRS") issued an opinion letter for the volume submitter plan on June 30, 2020, stating that the form of the volume submitter plan is acceptable under Section 401 of the IRC for use by employers for the benefit of their employees. Although the Plan has been amended since receiving the opinion letter, the Plan administrator believes the Plan is currently designed and being operated in compliance with the applicable requirements of the IRC. Therefore, no provision for income taxes has been included in the Plan's financial statements.

The Plan administrator is required to evaluate tax positions taken by the Plan and recognize a tax liability for any uncertain position that more likely than not would not be sustained upon examination by the IRS. No such liabilities are recognized at December 31, 2025 and 2024. The Plan is subject to routine audits by tax authorities; however, there are currently no audits for any tax periods in progress.

7. Subsequent Events

Management evaluated events and transactions after December 31, 2025 through September 22, 2026, the date the financial statements were available to be issued, for subsequent events.

Employer contributions of approximately $3,554,000 were paid to the Plan subsequent to December 31, 2025.

No other subsequent events were noted.

SUPPLEMENTAL SCHEDULE

The Comporium, Inc. 401(k) and Retirement Plan
Employer ID # 57-0236160 Plan # 001
Schedule H Part IV, Line 4i – Schedule of Assets (Held at End of Year)
December 31, 2025

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value	(d) Cost	(e) Current Value
	Mutual Funds			
*	Fidelity Blue Chip Growth Fund	Mutual fund	$ --	$ 27,115,272
	Vanguard Equity Income Fund - Admiral	Mutual fund	--	13,256,206
	TCW MetWest Total Return Bond Fund Class M	Mutual fund	--	5,780,930
	MFS International Diversification Fund Class R6	Mutual fund	--	4,920,456
	BlackRock High Yield Bond Fund Class K	Mutual fund	--	1,986,127
	MassMutual Small Cap Opps I Fund	Mutual fund	--	1,096,635
	PIF Global Real Estate Property Fund	Mutual fund	--	677,669
	Goldman Sachs Global Core Fixed Income Fund Institutional Shares	Mutual fund	--	651,186
			$ --	$ 55,484,481
	Collective Trusts			
	BlackRock LifePath Index 2035 Fund K	Collective trust	--	47,261,911
	BlackRock LifePath Index 2045 Fund K	Collective trust	--	38,716,825
	BlackRock Equity Index Fund GG	Collective trust	--	33,841,918
	BlackRock LifePath Index Retirement Fund G	Collective trust	--	18,860,292
*	Fidelity Advisor Stable Value Portfolio - Class I	Collective trust	--	12,285,687
	BlackRock LifePath Index 2055 Fund G	Collective trust	--	7,610,710
	BlackRock MSCI EAFE Equity Index Fund M	Collective trust	--	5,328,725
	BlackRock Mid Capitalization Equity Index Fund J	Collective trust	--	5,180,977
	BlackRock U.S. Debt Index Fund L	Collective trust	--	5,080,214
	BlackRock Russell 2000 Index Fund J	Collective trust	--	4,344,411
	BlackRock U.S. Treasury Inflation Protected Securities Fund M	Collective trust	--	3,516,376
	Emerging Markets Fund II CL I1	Collective trust	--	3,445,059
	BlackRock LifePath Index 2065 Fund G	Collective trust	--	1,848,289
	BlackRock LifePath Index 2030 Fund G	Collective trust	--	1,192,421
	BlackRock LifePath Index 2040 Fund G	Collective trust	--	419,117
	BlackRock LifePath Index 2060 Fund G	Collective trust	--	74,818
	BlackRock LifePath Index 2050 Fund G	Collective trust	--	74,690
	BlackRock LifePath Index 2070 Fund G	Collective trust	--	37,101
			$ --	$ 189,119,541

* Indicates a party-in-interest to the Plan

Note: The above information was derived from information certified by Fidelity Management Trust Company. Cost has been omitted for all participant-directed funds.

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Financial Statements
and Supplemental Schedule

The Comporium, Inc.
401(k) and Retirement Plan

Years Ended December 31, 2025 and 2024
with Report of Independent Auditors

The Comporium, Inc. 401(k) and Retirement Plan
Financial Statements
and Supplemental Schedule
Years Ended December 31, 2025 and 2024

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Report of Independent Auditors

Plan Administrator
The Comporium, Inc. 401(k) and Retirement Plan

Scope and Nature of the Employee Retirement Income Security Act of 1974 ("ERISA") Section 103(a)(3)(C) Audit

We have performed audits of the financial statements of The Comporium, Inc. 401(k) and Retirement Plan (the "Plan"), an employee benefit plan subject to ERISA, as permitted by ERISA Section 103(a)(3)(C) ("ERISA Section 103(a)(3)(C) audit"). The financial statements comprise the statements of net assets available for plan benefits – modified cash basis as of December 31, 2025 and 2024, and the related statements of changes in net assets available for plan benefits – modified cash basis for the years then ended, and the related notes to the financial statements.

Management, having determined it is permissible in the circumstances, has elected to have the audits of the 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 years then ended, 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 of our report:

- The amounts and disclosures in the accompanying financial statements, other than those agreed to or derived from the certified investment information, are presented fairly, in all material respects, in accordance with the modified cash basis of accounting described in Note 2 to the financial statements.

Opinion (continued)

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

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States. 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.

Emphasis of Matter – Basis of Accounting

We draw attention to Note 2 of the financial statements, which describes the basis of accounting. The financial statements were prepared using the modified cash basis of accounting, which is a basis of accounting other than generally accepted accounting principles in the United States. Our opinion is not modified with respect to that matter.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with the modified cash basis of accounting, 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.

Responsibilities of Management for the Financial Statements (continued)

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 Audits of the Financial Statements

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

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Plan's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.

Auditors' Responsibilities for the Audits of the Financial Statements (continued)

- 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 modified cash basis of accounting.

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 the modified cash basis of accounting.

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

Other Matter - Supplemental Schedule Required by ERISA

The supplemental schedule, as listed in the table of contents, is presented for purposes of additional analysis and is not a required part of the financial statements but is 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 2025 financial statements. The information included in the supplemental schedule, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audit of the 2025 financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the 2025 financial statements or to the 2025 financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States. For information included in the supplemental schedule that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

Other Matter - Supplemental Schedule Required by ERISA (continued)

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

In our opinion:

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

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

Smith & Howard, P.C

Columbia, South Carolina
September 22, 2026

The Comporium, Inc. 401(k) and Retirement Plan
Statements of Net Assets Available for Plan Benefits –
Modified Cash Basis

	December 31, 2025	2024
Assets		
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Statements of Changes in Net Assets Available for Plan Benefits –
Modified Cash Basis

	Years Ended December 31, 2025	2024
Additions to net assets attributed to:		
Investment income:		
Net appreciation in fair value of investments	**$ 34,094,943**	$ 19,567,646
Dividends and interest	**2,770,322**	6,345,563
	36,865,265	25,913,209
Contributions:		
Employer	**3,871,355**	3,546,621
Employee, including rollovers	**6,654,788**	7,076,145
	10,526,143	10,622,766
Total additions	**47,391,408**	36,535,975
Deductions from net assets attributed to:		
Benefits paid to participants, including rollovers	**26,226,270**	17,540,027
Administrative expenses	**70,083**	101,715
Total deductions	**26,296,353**	17,641,742
Net changes	**21,095,055**	18,894,233
Net assets available for plan benefits, beginning	**223,508,967**	204,614,734
Net assets available for plan benefits, ending	**$ 244,604,022**	$ 223,508,967

See accompanying notes.

1. Description of Plan

Organization

Comporium, Inc. (the "Company" or "Sponsor") sponsors a "deferred profit-sharing" retirement plan and trust (the "Plan") with a 401(k) arrangement to provide retirement benefits for substantially all of its employees. The Plan has been restated and amended periodically, as necessary, to maintain its exemption from Federal income taxes under Section 501(a) of the Internal Revenue Code ("IRC"), to comply with the requirements of the Employee Retirement Income Security Act of 1974 ("ERISA"), and to help achieve business objectives of the Sponsor.

The Plan includes six majority-owned subsidiaries of the Company, including Catawba Services, Inc., Community Long Distance, Inc., Springboard Telecom, LLC, Citizens Telephone Company, IMS Solutions Group, LLC, and Chesnee Telephone Company.

Participants may refer to the Plan's documents for more complete information.

Eligibility of Participants

Employees, including part-time employees, are eligible to become participants in the 401(k) and matching portions of the Plan as soon as administratively feasible following the date on which they were hired but must be twenty-one years of age to participate. Participants who do not choose a specific deferral rate are automatically enrolled into the Plan at a deferral rate of 3% of pretax compensation, unless they opt out of participating in the Plan.

Employees become participants in the profit-sharing portion of the Plan as of the January 1 entry date preceding the date they have attained age twenty-one, and completing 1,000 hours of service during the plan year.

Participant Accounts

Individual accounts are maintained for each participant reflecting employee and employer contributions, investment income or losses, distributions, reallocations of forfeitures of non-vested portions of separated participant accounts, and plan expenses.

1. Description of Plan (continued)

Participant Accounts (continued)

Employer profit-sharing contributions are allocated among active participants in the same ratio that each active participant's compensation for the plan year bears to the total compensation of all active participants for the plan year. During the years ended December 31, 2025 and 2024, there were no profit-sharing contributions made to the Plan.

Contributions

Participants may contribute up to the legal limits allowable under the law (not to exceed 75% of their pretax compensation) to the 401(k) portion of the Plan. Participants who have attained age fifty before the end of the Plan year are eligible to make catch-up contributions. Participants may also contribute amounts representing rollover distributions from other qualified benefit plans. The Company must make up to 5% matching contributions under the Plan's safe harbor provisions. Discretionary contributions, determined annually by the Company for non-safe harbor matching and profit-sharing, may also be made to the Plan. No discretionary contributions were made to the Plan during the years ended December 31, 2025 and 2024.

Forfeitures

Participants withdrawing from the Plan with non-vested employer contributions in their accounts forfeit their share of non-vested contributions and earnings thereon. The Plan's provisions allow these amounts to be used for administrative expenses to the Plan or to reduce any employer contributions. As of December 31, 2025 and 2024, forfeited non-vested accounts totaled approximately $134,000 and $111,000, respectively. Approximately $23,000, annually, of forfeited non-vested accounts were used to reduce Plan expenses during the years ended December 31, 2025 and 2024.

Vesting

Participants are 100% vested in all employer matching contributions. Profit-sharing contributions for participants are 20% vested at the end of one year of continuous service, with additional vesting of 20% for each of the next four years, resulting in 100% vesting after the fifth year.

A participant's account is also 100% vested under the Plan upon death or disability of the participant regardless of years of service.

1. Description of Plan (continued)

Investment Options

The Plan allows individual participants, upon enrollment, to self-direct their accounts by investing in one or more mutual funds or collective trusts selected by the Plan administrator from the funds offered by fund providers selected by the Plan administrator. Participants may refer to fund provider information for a detailed description of the Plan's investment options.

Administrative Expenses

Certain administrative expenses, including recordkeeping and certain professional fees, are charged to individual participants' accounts. Any expenses not paid by the Plan are paid by the Company and are excluded from the financial statements.

Termination of the Plan

The Plan may be terminated by written instrument executed for the Company by appropriate resolution of its board of directors and conveyed to the trustee and the Plan administrator. In the event contributions are completely discontinued and the Plan is terminated, all the funds shall be administered and distributed in the manner described in the Plan. Participants who were not 100% vested in their accounts will become 100% vested at the time of Plan termination.

Payment of Benefits

Upon termination of service due to death, disability, or retirement, a participant may, subject to certain conditions, elect to receive their vested portion of Plan assets under several payout options specified in the Plan's documents. Subject to certain conditions, a participant may receive hardship withdrawals from his or her balance in the Plan while employed. Participants who have attained 59½ years of age are permitted to withdraw all or part of their vested accounts as in-service distributions. Participants automatically begin receiving distributions on April 1st of the calendar year following the year in which they have attained 73 years of age. Upon retirement or separation from the Company, vested benefits are payable in a lump-sum or certain other options as specified in the Plan.

2. Summary of Significant Accounting Policies

Financial Statement Presentation

The Plan's policy is to prepare its financial statements using the modified cash basis of accounting, which is a comprehensive basis of accounting other than accounting principles generally accepted in the United States. Under the Plan's accounting policy, contributions and investment income are recorded as received and expenses are recorded when paid.

Estimates

The preparation of financial statements in conformity with the modified cash basis of accounting requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosures of contingent assets and liabilities at the date of the financial statements and the reported amounts of changes in net assets during the reporting period. Actual results could differ from those estimates.

Investment Valuation and Income Recognition

Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See Note 4 for discussion of fair value measurements.

Purchases and sales of securities are recorded on a trade-date basis. Interest and dividends are recorded when received. Net appreciation includes the Plan's gains and losses on investments bought and sold as well as held during the year.

Risks and Uncertainties

The Plan's investment securities are exposed to various risks such as interest rate, market, and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect participants' account balances and the amounts reported in the 2025 statement of net assets available for plan benefits – modified cash basis. Actual results could differ from those estimates.

Payment of Benefits

Benefit payments are recorded when paid.

3. Trustee Certification

Information disclosed in the accompanying financial statements as of and for the years ended December 31, 2025 and 2024, related to investments, net appreciation in fair value of investments, and interest and dividends, was obtained or derived from information supplied to the Plan administrator and certified as complete and accurate by Fidelity Management Trust Company (the "Trustee").

4. Fair Value Measurements

Financial assets are reported at fair value and are classified and disclosed within a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. This hierarchy consists of three broad levels: Level 1 inputs consist of unadjusted quoted prices in active markets for identical assets and have the highest priority; Level 2 inputs consist of observable inputs other than quoted prices for identical assets; and Level 3 inputs to the valuation methodology are unobservable. The Plan uses appropriate valuation techniques based on the available inputs to measure the fair value of its investments. When available, the Plan measures fair value using Level 1 inputs because they generally provide the most reliable evidence of fair value.

The following tables present fair value measurement information for the Plan's investments:

	As of December 31, 2025			
	Quoted Market Prices (Level 1)	Significant Other Observable Inputs (Level 2)	Unobservable Inputs (Level 3)	Total at Fair Value
Mutual funds	$ 55,484,481	$ --	$ --	$ 55,484,481
Total assets in fair value hierarchy	$ 55,484,481	$ --	$ --	55,484,481
Investments measured at NAV (a)				189,119,541
Total investments				$ 244,604,022

4. Fair Value Measurements (continued)

	As of December 31, 2024			
	Quoted Market Prices (Level 1)	Significant Other Observable Inputs (Level 2)	Unobservable Inputs (Level 3)	Total at Fair Value
Mutual funds	$ 207,336,063	$ --	$ --	$ 207,336,063
Total assets in fair value hierarchy	$ 207,336,063	$ --	$ --	207,336,063
Investments measured at NAV (a)				16,172,904
Total investments				$ 223,508,967

(a) Represents collective trusts which are measured at net asset value ("NAV") as a practical expedient and are not classified in the fair value hierarchy.

Level 1 Fair Value Measurements - The fair values of mutual funds are based on quoted net asset values of the shares held by the Plan at year end.

The Plan's investments, all of which are participant directed, are reported at fair value in the accompanying financial statements. The Plan invests in the Fidelity Advisor Stable Value Portfolio , the Emerging Markets Fund II, and various BlackRock funds. These funds are collective trusts that invest in a variety of fully benefit-responsive investment contracts and mutual funds. The collective trusts are valued at NAV of units of the accounts. The NAV, as provided by the issuers, is used as a practical expedient to estimate fair value. The NAV is based on the fair value of the underlying investments held less the account's liabilities. This practical expedient is not used when it is determined to be probable that the Plan will sell the investment for an amount different than the reported NAV. Participant transactions (purchases and sales) may occur daily. Were the Plan to initiate a full redemption of any of the trusts, the account provider reserves the right to temporarily delay withdrawal from the trust in order to ensure that security liquidations will be carried out in an orderly business manner.

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

5. Party-in-Interest Transactions

At December 31, 2025 and 2024, the Plan held mutual funds managed by the Plan's trustee. Net fees for the trustee, recordkeeping, and investment advisory services amounted to approximately $70,000 and $102,000 for the years ended December 31, 2025 and 2024, respectively. These transactions qualify as party-in-interest transactions under ERISA and are exempt from the prohibited transactions rules of ERISA.

6. Filing Status

No determination letter has been received for the Plan as it operates under a volume submitter plan document. The Internal Revenue Service ("IRS") issued an opinion letter for the volume submitter plan on June 30, 2020, stating that the form of the volume submitter plan is acceptable under Section 401 of the IRC for use by employers for the benefit of their employees. Although the Plan has been amended since receiving the opinion letter, the Plan administrator believes the Plan is currently designed and being operated in compliance with the applicable requirements of the IRC. Therefore, no provision for income taxes has been included in the Plan's financial statements.

The Plan administrator is required to evaluate tax positions taken by the Plan and recognize a tax liability for any uncertain position that more likely than not would not be sustained upon examination by the IRS. No such liabilities are recognized at December 31, 2025 and 2024. The Plan is subject to routine audits by tax authorities; however, there are currently no audits for any tax periods in progress.

7. Subsequent Events

Management evaluated events and transactions after December 31, 2025 through September 22, 2026, the date the financial statements were available to be issued, for subsequent events.

Employer contributions of approximately $3,554,000 were paid to the Plan subsequent to December 31, 2025.

No other subsequent events were noted.

SUPPLEMENTAL SCHEDULE

The Comporium, Inc. 401(k) and Retirement Plan
Employer ID # 57-0236160 Plan # 001
Schedule H Part IV, Line 4i – Schedule of Assets (Held at End of Year)
December 31, 2025

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value	(d) Cost	(e) Current Value
	Mutual Funds			
*	Fidelity Blue Chip Growth Fund	Mutual fund	$ --	$ 27,115,272
	Vanguard Equity Income Fund - Admiral	Mutual fund	--	13,256,206
	TCW MetWest Total Return Bond Fund Class M	Mutual fund	--	5,780,930
	MFS International Diversification Fund Class R6	Mutual fund	--	4,920,456
	BlackRock High Yield Bond Fund Class K	Mutual fund	--	1,986,127
	MassMutual Small Cap Opps I Fund	Mutual fund	--	1,096,635
	PIF Global Real Estate Property Fund	Mutual fund	--	677,669
	Goldman Sachs Global Core Fixed Income Fund Institutional Shares	Mutual fund	--	651,186
			$ --	$ 55,484,481
	Collective Trusts			
	BlackRock LifePath Index 2035 Fund K	Collective trust	--	47,261,911
	BlackRock LifePath Index 2045 Fund K	Collective trust	--	38,716,825
	BlackRock Equity Index Fund GG	Collective trust	--	33,841,918
	BlackRock LifePath Index Retirement Fund G	Collective trust	--	18,860,292
*	Fidelity Advisor Stable Value Portfolio - Class I	Collective trust	--	12,285,687
	BlackRock LifePath Index 2055 Fund G	Collective trust	--	7,610,710
	BlackRock MSCI EAFE Equity Index Fund M	Collective trust	--	5,328,725
	BlackRock Mid Capitalization Equity Index Fund J	Collective trust	--	5,180,977
	BlackRock U.S. Debt Index Fund L	Collective trust	--	5,080,214
	BlackRock Russell 2000 Index Fund J	Collective trust	--	4,344,411
	BlackRock U.S. Treasury Inflation Protected Securities Fund M	Collective trust	--	3,516,376
	Emerging Markets Fund II CL I1	Collective trust	--	3,445,059
	BlackRock LifePath Index 2065 Fund G	Collective trust	--	1,848,289
	BlackRock LifePath Index 2030 Fund G	Collective trust	--	1,192,421
	BlackRock LifePath Index 2040 Fund G	Collective trust	--	419,117
	BlackRock LifePath Index 2060 Fund G	Collective trust	--	74,818
	BlackRock LifePath Index 2050 Fund G	Collective trust	--	74,690
	BlackRock LifePath Index 2070 Fund G	Collective trust	--	37,101
			$ --	$ 189,119,541

* Indicates a party-in-interest to the Plan

Note: The above information was derived from information certified by Fidelity Management Trust Company. Cost has been omitted for all participant-directed funds.