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
- [X] a multiple-employer plan (Filers checking this box must provide participating employer information in accordance with the form instructions.)
- [ ] 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
RETINA CONSULTANTS OF AMERICA 401(K) PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 07/01/2021

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)
RETINA GROUP, INC. DBA RETINA CONSULTANTS OF AMERICA

601 STATE STREET, SUITE 325
SOUTHLAKE, TX 76092

2b Employer Identification Number (EIN) 84-3983059

2c Plan Sponsor's telephone number 972-779-0707

2d Business code (see instructions) 621111

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.	10/12/2026	ZACH MCCLAIN
	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**	5820
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)**	4799
a(2)	Total number of active participants at the end of the plan year	**6a(2)**	5433
b	Retired or separated participants receiving benefits	**6b**	11
c	Other retired or separated participants entitled to future benefits	**6c**	2394
d	Subtotal. Add lines **6a(2)**, **6b**, and **6c**.	**6d**	7838
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	8
f	Total. Add lines **6d** and **6e**.	**6f**	7846
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)**	5174
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)**	7381
h	Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.	**6h**	158
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:

2J 2K 2S 2T 2A 2E 2F 2G 2U 3D 2R

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)** [X] **MEP** (Multiple-Employer Retirement Plan Information)

b General Schedules

- **(1)** [X] **H** (Financial Information)
- **(2)** [ ] **I** (Financial Information – Small Plan)
- **(3)** [ ] **A** (Insurance Information) – Number Attached 0
- **(4)** [X] **C** (Service Provider Information)
- **(5)** [X] **D** (DFE/Participating Plan Information)
- **(6)** [ ] **G** (Financial Transaction Schedules)

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

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

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

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

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

Receipt Confirmation Code_____

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

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

A Name of plan
RETINA CONSULTANTS OF AMERICA 401(K) PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
RETINA GROUP, INC. DBA RETINA CONSULTANTS OF AMERICA

D Employer Identification Number (EIN)
84-3983059

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 INSTITUTIONAL

04-2647786

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
37 60 64 65 71	RECORDKEEPER	462166	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [X] No [ ]

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

STRATEGIC ADVISERS LLC

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	61216	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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
METLIFE STABLE VAL L 200 PARK AVENUE NEW YORK, NY 10166	0.50%

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

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
AMERICAN WASHNTN MUTUAL INVESTRS CL 3500 WISEMAN BLVD SAN ANTONIO, TX 78251	$18.00

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

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
WASATCH CORE GROWTH 505 WAKARA WAY STE 300 SALT LAKE CITY, UT 84108	0.40%

Part I Service Provider Information (continued)

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

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

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
AMERICAN SMALL CAP WORLD CLASS A 3500 WISEMAN BLVD SAN ANTONIO, TX 78251	$18.00

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

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
T ROWE PRICE INTRTD US SM CAP GR EQ 4515 PAINTERS MILL RD OWINGS MILLS, MD 21117	0.15%

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

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
T ROWE PRICE MID CAP VALUE 4515 PAINTERS MILL RD OWINGS MILLS, MD 21117	0.15%

Part I Service Provider Information (continued)

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

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

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
T ROWE PRICE NEW HORIZONS FD INC 4515 PAINTERS MILL RD OWINGS MILLS, MD 21117	0.15%

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

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
PUTNAM LARGE CAP VALCLASS A 1 POST OFFICE SQ MAILZONE G3C BOSTON, MA 02109	0.40%

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

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
CONGRESS MID CAP GROWTH RETAIL TWO SEAPORT LANE BOSTON, MA 02210	0.40%

Part I Service Provider Information (continued)

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

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

(d) Enter name and EIN (address) of source of indirect compensation		**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
PIMCO INCOME FUND CL A	1633 BROADWAY NEW YORK, NY 10019	0.40%

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

(d) Enter name and EIN (address) of source of indirect compensation		**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
PARNASSUS MID CAP	1 MARKET ST STEUART TOWER STE 1600 SAN FRANCISCO, CA 94105	0.40%

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

(d) Enter name and EIN (address) of source of indirect compensation		**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
AMERICAN NEW WORLD CLASS F1	3500 WISEMAN BLVD SAN ANTONIO, TX 78251-4321	0.37%

Part I Service Provider Information (continued)

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

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

(d) Enter name and EIN (address) of source of indirect compensation		**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
MFS GROWTH FUND CLASS A	111 HUNTINGTON AVE BOSTON, MA 02199-7632	0.40%

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

(d) Enter name and EIN (address) of source of indirect compensation		**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
MFS VALUE CLASS A	111 HUNTINGTON AVE BOSTON, MA 02199-7632	0.40%

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

(d) Enter name and EIN (address) of source of indirect compensation		**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
MFS INTERNATIONAL DIVERSIFICATION F	111 HUNTINGTON AVE BOSTON, MA 02199-7632	0.40%

Part I Service Provider Information (continued)

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

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

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
MFS MID CAP VALUE CLASS A 111 HUNTINGTON AVE BOSTON, MA 02199-7632	0.40%

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

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
LORD ABBETT SHORT DURATION INCOME C 90 HUDSON ST 10TH FL JERSEY CITY, NJ 07302	0.37%

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

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
JPMORGAN GL BOND OPPORTUNITIES FUND 1111 POLARIS PARKWAY COLUMBUS, OH 43240	0.40%

Part I Service Provider Information (continued)

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

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

(d) Enter name and EIN (address) of source of indirect compensation		**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
HARTFORD SCHRODERS INTL STOCK CL A	100 MATSONFORD RD STE 300 RADNOR, PA 19087	0.40%

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

(d) Enter name and EIN (address) of source of indirect compensation		**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
GUGGENHEIM MACRO OPPORTUNTITIES INS	9601 BLACKWELL RD STE 500 ROCKVILLE, MD 20850	0.15%

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

(d) Enter name and EIN (address) of source of indirect compensation		**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
AMERICAN GROWTH FUNDOF AMERICA CLAS	3500 WISEMAN BLVD SAN ANTONIO, TX 78251	$18.00

Part I Service Provider Information (continued)

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

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

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
AMERICAN FUNDAMENTALINVESTORS CL F1 3500 WISEMAN BLVD SAN ANTONIO, TX 78251-4321	0.37%

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

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
AMERICAN EUROPAC FD A 3500 WISEMAN BLVD SAN ANTONIO, TX 78251	$18.00

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

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
DRIEHAUS EMERGING MARKETS 25 EAST ERIE ST CHICAGO, IL 60611	0.40%

Part I Service Provider Information (continued)

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

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

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
DFA INTERNATIONAL VALUE PRTF INSTL 6300 BEE CAVES ROAD BUILDING ONE AUSTIN, TX 78746	0.02%

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

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
DFA US TARGETED VALUE PRTF INSTL 6300 BEE CAVES ROAD BUILDING ONE AUSTIN, TX 78746	0.02%

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

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
AMERICAN CAPITAL WORLD GRWTH & INC 3500 WISEMAN BLVD SAN ANTONIO, TX 78251-4321	0.37%

Part I Service Provider Information (continued)

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

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

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
BAIRD AGGREGATE BOND FUND INSTL 777 E. WISCONSIN AVE 18TH FL MILWAUKEE, WI 53202	0.03%

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

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
AMERICAN MUTUAL FUNDCLASS F1 3500 WISEMAN BLVD SAN ANTONIO, TX 78251-4321	0.37%

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

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
AMANA MUTUAL FUND TRUST GROWTH 1300 NORTH STATE ST BELLINGHAM, WA 98225	0.40%

Part I Service Provider Information (continued)

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

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

(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
AB LARGE CAP GROWTH CLASS A 8000 IH 10 W, STE 1400 14TH FL SAN ANTONIO, TX 78230	0.40%

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

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

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

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

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

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

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

(complete as many entries as needed)

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

SCHEDULE 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
RETINA CONSULTANTS OF AMERICA 401(K) PLAN

B Three-digit plan number (PN) ▶ 001

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
RETINA GROUP, INC. DBA RETINA CONSULTANTS OF AMERICA

D Employer Identification Number (EIN)
84-3983059

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: GG FKLN SM CAP VAL

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

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)
38-4126289-594	C	1206452

a Name of MTIA, CCT, PSA, or 103-12 IE: VANG RET SAV TRUST

b Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY

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)
45-5436422-022	C	158657

a Name of MTIA, CCT, PSA, or 103-12 IE: ML SV SOLUTIONS L

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

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)
26-0142858-094	C	284246

a Name of MTIA, CCT, PSA, or 103-12 IE: JH CR PL FXD INC I2

b Name of sponsor of entity listed in (a): JOHN HANCOCK TRUST COMPANY

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)
85-6153745-004	C	3451593

a Name of MTIA, CCT, PSA, or 103-12 IE: PUTN LG CP VAL TR IA

b Name of sponsor of entity listed in (a): PUTNAM FIDUCIARY TRUST COMPANY

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)
82-3639536-275	C	5033292

a Name of MTIA, CCT, PSA, or 103-12 IE: PIF MID CAP EQ IV

b Name of sponsor of entity listed in (a): PRINCIPAL GLOBAL INVESTORS TRUST CO

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)
45-5114041-001	C	1275609

a Name of MTIA, CCT, PSA, or 103-12 IE: JH DSCPL VAL MDCP B5

b Name of sponsor of entity listed in (a): JOHN HANCOCK TRUST COMPANY

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)
85-6153745-038	C	2842138

a Name of MTIA, CCT, PSA, or 103-12 IE: AB US LG CP GR CIT L

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

c EIN-PN 38-4116831-509	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 9825865

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

b Name of sponsor of entity listed in (a): PUTNAM FIDUCIARY TRUST COMPANY

c EIN-PN 04-3159710-202	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 3601075

a Name of MTIA, CCT, PSA, or 103-12 IE: VANG RET SAV TRUST

b Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY

c EIN-PN 90-6083968-001	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

SCHEDULE H (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Financial Information

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

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

OMB No. 1210-0110

2025

This Form is Open to Public Inspection

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

A Name of plan
RETINA CONSULTANTS OF AMERICA 401(K) PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
RETINA GROUP, INC. DBA RETINA CONSULTANTS OF AMERICA

D Employer Identification Number (EIN)
84-3983059

Part I Asset and Liability Statement

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

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a	0	0
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	0	21179547
(2) Participant contributions	1b(2)	0	27282
(3) Other	1b(3)	0	0
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	8992732	7500284
(2) U.S. Government securities	1c(2)	523655	2696538
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)	0	0
(B) All other	1c(3)(B)	0	0
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)	239508	248173
(B) Common	1c(4)(B)	8734860	15357043
(5) Partnership/joint venture interests	1c(5)	0	0
(6) Real estate (other than employer real property)	1c(6)	0	0
(7) Loans (other than to participants)	1c(7)	0	0
(8) Participant loans	1c(8)	1875473	2681325
(9) Value of interest in common/collective trusts	1c(9)	6421330	27678927
(10) Value of interest in pooled separate accounts	1c(10)	0	0
(11) Value of interest in master trust investment accounts	1c(11)	0	0
(12) Value of interest in 103-12 investment entities	1c(12)	0	0
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	326381935	392131656
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)	0	0
(15) Other	1c(15)	0	373

		(a) Beginning of Year	(b) End of Year
1d Employer-related investments:			
(1) Employer securities	1d(1)	0	0
(2) Employer real property	1d(2)	0	0
1e Buildings and other property used in plan operation	1e	0	0
1f Total assets (add all amounts in lines 1a through 1e)	1f	353169493	469501148
Liabilities			
1g Benefit claims payable	1g	0	0
1h Operating payables	1h	0	0
1i Acquisition indebtedness	1i	0	0
1j Other liabilities	1j	0	0
1k Total liabilities (add all amounts in lines 1g through1j)	1k	0	0
Net Assets			
1l Net assets (subtract line 1k from line 1f)	1l	353169493	469501148

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)	21469536	
(B) Participants	2a(1)(B)	40359914	
(C) Others (including rollovers)	2a(1)(C)	11906756	
(2) Noncash contributions	2a(2)	0	
(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		73736206
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	436432	
(B) U.S. Government securities	2b(1)(B)	77426	
(C) Corporate debt instruments	2b(1)(C)	0	
(D) Loans (other than to participants)	2b(1)(D)	0	
(E) Participant loans	2b(1)(E)	186202	
(F) Other	2b(1)(F)	0	
(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		700060
(2) Dividends: **(A)** Preferred stock	2b(2)(A)	16261	
(B) Common stock	2b(2)(B)	174135	
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	18203176	
(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		18393572
(3) Rents	2b(3)		0
(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)	19767604	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	19294174	
(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		473430
(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)	0	
(B) Other	2b(5)(B)	4672069	
(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		4672069

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		3491890
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		0
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		0
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		0
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		35992271
c Other income	2c		0
d Total income. Add all **income** amounts in column (b) and enter total	2d		137459498
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	32887494	
(2) To insurance carriers for the provision of benefits	2e(2)	0	
(3) Other	2e(3)	0	
(4) Total benefit payments. Add lines **2e(1)** through **(3)**	2e(4)		32887494
f Corrective distributions (see instructions)	2f		49216
g Certain deemed distributions of participant loans (see instructions)	2g		-3594
h Interest expense	2h		0
i Administrative expenses:			
(1) Salaries and allowances	2i(1)	0	
(2) Contract administrator fees	2i(2)	1200	
(3) Recordkeeping fees	2i(3)	458323	
(4) IQPA audit fees	2i(4)	0	
(5) Investment advisory and investment management fees	2i(5)	61216	
(6) Bank or trust company trustee/custodial fees	2i(6)	0	
(7) Actuarial fees	2i(7)	0	
(8) Legal fees	2i(8)	0	
(9) Valuation/appraisal fees	2i(9)	0	
(10) Other trustee fees and expenses	2i(10)	0	
(11) Other expenses	2i(11)	0	
(12) Total administrative expenses. Add lines **2i(1)** through **(11)**	2i(12)		520739
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		33453855
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		104005643
l Transfers of assets:			
(1) To this plan	2l(1)		12326012
(2) From this plan	2l(2)		0

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: GRANT THORNTON LLP **(2)** EIN: 36-6055558

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		1665960
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)	**4b**		X	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	**4c**		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)	**4d**		X	
e Was this plan covered by a fidelity bond?	**4e**	X		500000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	**4f**		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	**4g**		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	**4h**		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	**4i**	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)	**4j**		X	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	**4k**		X	
l Has the plan failed to provide any benefit when due under the plan?	**4l**	X		926
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
RETINA CONSULTANTS OF AMERICA 401(K) PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
RETINA GROUP, INC. DBA RETINA CONSULTANTS OF AMERICA

D Employer Identification Number (EIN)
84-3983059

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**	
	b Enter the amount contributed by the employer to the plan for this plan year	**6b**	
	c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount)	**6c**	

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

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

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

Part III Amendments

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

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

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

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

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

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

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

---

a Name of contributing employer

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

☐ Yes.

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

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

☐ No. Other. Provide explanation._____

Part VII IRS Compliance Questions

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

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

☐ Design-based safe harbor method

☐ "Prior year" ADP test

☐ "Current year" ADP test

☐ N/A

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

SCHEDULE MEP (Form 5500)	MULTIPLE-EMPLOYER RETIREMENT PLAN INFORMATION	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration	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.**	**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 RETINA CONSULTANTS OF AMERICA 401(K) PLAN	**B** Three-digit Plan number (PN)..... ▶ 001
C Plan administrator's name as shown on line 3a of Form 5500/Form 5500-SF RETINA GROUP, INC. DBA RETINA CONSULTANTS OF AMERICA	**D** Administrator's EIN 84-3983059

Part I Type of Multiple-Employer Pension Plan. All multiple-employer pension plans must complete.

1 Check the appropriate box to indicate type of multiple-employer pension plan. (Only defined contribution plans may check lines 1a, 1b, and 1c. Defined benefit plans and defined contribution plans not checking lines 1a, 1b, or 1c should check line 1d. See Instructions).

- **a** [X] association retirement plan (See 29 CFR 2510.3-55) (Complete Part II)
- **b** [ ] professional employer organization plan (PEO Plan) (See 29 CFR 29 CFR 2510.3-55) (Complete Part II)
- **c** [ ] pooled employer plan (PEP) (See 29 CFR 2510.3-44) (Complete Parts II and III)
- **d** [ ] other multiple-employer pension plan (Describe)_____ (Complete Part II)

Part II Participating Employer Information.

2 All multiple-employer pension plans that are subject to section 210(a) of ERISA (see instructions for filing the Form 5500) must complete Part II, in addition to Part I, in accordance with the instructions, to report the information for each employer participating in the multiple-employer pension plan. **Defined contribution plans must complete lines 2a-2d. All other multiple-employer pension plans complete lines 2a-2c only. Complete as many entries as needed to list the required information for each participating employer that is not an individual person (see instructions).**

2a Name of Participating Employer	**2b** EIN	**2c** Percentage of Total Contributions for the Plan Year	**2d** Aggregate Account Balances Attributable to Participating Employer
RETINA GROUP OF FLORIDA	65-0017482	10.94	29548539
2a Name of Participating Employer	**2b** EIN	**2c** Percentage of Total Contributions for the Plan Year	**2d** Aggregate Account Balances Attributable to Participating Employer
RETINA CONSULTANTS OF HOUSTON, PLLC	74-2109903	9.26	29279046

CAUTION Do not individually list information for working owners (see instructions and 29 CFR 2510.3-55(d)(2)) or other individuals who are participants or beneficiaries in the plan or arrangement that are no longer associated with a particular participating employer or participating employer plan (see instructions). Providing identifying information for individuals may result in rejection of this filing. If there are any such individuals in the plan, answer "Yes" to line 2e and provide the total information for all such individuals, without providing names or other identifying information.

2e	Does the plan include any individuals not participating through an employer or who are individual working owners?	**2e**	[ ] Yes [X] No
2f	If you answer "Yes" in line 2e, enter a good faith estimate of the percentage of total contributions made by all such individuals that are not listed on line 2a during the plan year.	**2f**	
2g	If you answer "Yes" in Line 2e, enter the aggregate account balances for all such individuals that are not listed on line 2a.	**2g**	

Part II Participating Employer Information (Continued).

Use this page for additional participating employer information.

2 All multiple-employer pension plans that are subject to section 210(a) of ERISA (see instructions for filing the Form 5500) must complete Part II, in addition to Part I, in accordance with the instructions, to report the information for each employer participating in the multiple-employer pension plan**.**

Defined contribution plans must complete lines 2a-2d. All other multiple-employer pension plans complete lines 2a-2c only. Complete as many entries as needed to list the required information for each participating employer that is not an individual person (see instructions).

2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
VITREORETINAL SURGERY, PLLC	41-1608615	8.6	48638737
AUSTIN RETINA ASSOCIATES, PLLC	74-2034080	5.87	18424892
LONG ISLAND VITREORETINAL CONSULTANTS, P.C.	11-2566918	5.85	44718871
TENNESSEE RETINA, P.C.	62-1042760	5.35	21359855
PACIFIC NORTHWEST RETINA, PLLC	85-3863379	5.31	28993495
VITREO-RETINAL MEDICAL GROUP, INC.	94-2442567	5.16	10759984
COLORADO RETINA ASSOCIATES, PLLC	20-3288374	4.42	17902664
RETINA ASSOCIATES, PLLC	56-2043271	4.23	17587671
RETINA ASSOCIATES, LLC	48-1211774	3.96	22463798

CAUTION Do not individually list information for working owners (see instructions and 29 CFR 2510.3-55(d)(2)) or other individuals who are participants or beneficiaries in the plan or arrangement that are no longer associated with a particular participating employer or participating employer plan (see instructions). Providing identifying information for individuals may result in rejection of this filing. If there are any such individuals in the plan, answer “Yes” to line 2e and provide the total information for all such individuals, without providing names or other identifying information.

Part II Participating Employer Information (Continued).

Use this page for additional participating employer information.

2 All multiple-employer pension plans that are subject to section 210(a) of ERISA (see instructions for filing the Form 5500) must complete Part II, in addition to Part I, in accordance with the instructions, to report the information for each employer participating in the multiple-employer pension plan**.**

Defined contribution plans must complete lines 2a-2d. All other multiple-employer pension plans complete lines 2a-2c only. Complete as many entries as needed to list the required information for each participating employer that is not an individual person (see instructions).

2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
RETINA GROUP, INC. DBA RETINA CONSULTANTS OF AMERICA	84-3983059	3.75	8030003
CALIFORNIA RETINA CONSULTANTS	22-3697030	3.46	23330874
PALMETTO RETINA CENTER, LLC	57-0955585	3.29	15555004
ILLINOIS RETINA ASSOCIATES, PLLC	36-2970624	3.22	21751738
RETINA CONSULTANTS, P.L.L.C	55-0703678	1.97	8362403
RETINA ASSOCIATES OF UTAH, PLLC	87-0525682	1.91	10463946
CHARLESTON NEUROSCIENCE INSTITUTE, LLC	20-2359956	1.9	5680660
ASSOCIATED VITREORETINAL & UVEITIS CONSULTANTS, LLC	35-1497551	1.84	11534974
RETINA CONSULTANTS OF SOUTHERN COLORADO, PLLC	84-1145709	1.81	14868951

CAUTION Do not individually list information for working owners (see instructions and 29 CFR 2510.3-55(d)(2)) or other individuals who are participants or beneficiaries in the plan or arrangement that are no longer associated with a particular participating employer or participating employer plan (see instructions). Providing identifying information for individuals may result in rejection of this filing. If there are any such individuals in the plan, answer “Yes” to line 2e and provide the total information for all such individuals, without providing names or other identifying information.

Part II Participating Employer Information (Continued).

Use this page for additional participating employer information.

2 All multiple-employer pension plans that are subject to section 210(a) of ERISA (see instructions for filing the Form 5500) must complete Part II, in addition to Part I, in accordance with the instructions, to report the information for each employer participating in the multiple-employer pension plan**.**

Defined contribution plans must complete lines 2a-2d. All other multiple-employer pension plans complete lines 2a-2c only. Complete as many entries as needed to list the required information for each participating employer that is not an individual person (see instructions).

2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
NORTHEAST WISCONSIN RETINA ASSOCIATES, S.C.	38-1842462	1.48	4379092
MISSISSIPPI RETINA ASSOCIATES, PLLC	64-0860086	1.48	12579361
SOUTH COAST RETINA CENTER	95-2785489	1.24	3195204
RETINA GROUP OF NEW ENGLAND, P.C.	47-4304070	1.05	3818286
THOMPSON & SJAARDA, P.A. DBA RETINA SPECIALISTS	52-1998865	0.81	3661536
MID-ATLANTIC RETINA SPECIALISTS	20-4841431	0.59	3700801
RETINA CONSULTANTS, LLC	43-0913832	0.39	3322329
GULF COAST RETINA ASSOCIATES, PLLC	41-2104593	0.25	311567
ROCKY MOUNTAIN UVEITIS, LLC	99-4080994	0.23	1588321

CAUTION Do not individually list information for working owners (see instructions and 29 CFR 2510.3-55(d)(2)) or other individuals who are participants or beneficiaries in the plan or arrangement that are no longer associated with a particular participating employer or participating employer plan (see instructions). Providing identifying information for individuals may result in rejection of this filing. If there are any such individuals in the plan, answer “Yes” to line 2e and provide the total information for all such individuals, without providing names or other identifying information.

Part II Participating Employer Information (Continued).

Use this page for additional participating employer information.

2 All multiple-employer pension plans that are subject to section 210(a) of ERISA (see instructions for filing the Form 5500) must complete Part II, in addition to Part I, in accordance with the instructions, to report the information for each employer participating in the multiple-employer pension plan**.**

Defined contribution plans must complete lines 2a-2d. All other multiple-employer pension plans complete lines 2a-2c only. Complete as many entries as needed to list the required information for each participating employer that is not an individual person (see instructions).

2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
VITREO RETINAL SURGEONS, LLC	01-0637481	0.22	183552
TAYLOR RETINA CENTER, PA	56-2261355	0.16	0
RETINA ASSOCIATES OF SARASOTA, PA	26-1431864	0.0	43
NORTHERN CALIFORNIA ADVANCED SURGERY CENTER, LP	26-4264927	0.0	1378

CAUTION Do not individually list information for working owners (see instructions and 29 CFR 2510.3-55(d)(2)) or other individuals who are participants or beneficiaries in the plan or arrangement that are no longer associated with a particular participating employer or participating employer plan (see instructions). Providing identifying information for individuals may result in rejection of this filing. If there are any such individuals in the plan, answer “Yes” to line 2e and provide the total information for all such individuals, without providing names or other identifying information.

Part III Pooled Employer Plan Information

Line 3. All Pooled employer plans must answer all of the questions in Part III, in addition to completing all of Parts I and II.

3a Is the pooled plan provider (identified as the plan sponsor and administrator in Part II of the Form 5500) currently in compliance with the Form PR (Pooled Plan Provider Registration Statement) requirements? (See instructions and 29 CFR 2510.3-44) ☐ Yes ☐ No

3b If line 3a is "Yes", enter the ACK ID for the most recent Form PR that was required to be filed under the Form PR filing requirements. (Failure to enter a valid ACK ID will subject the Form 5500 filing to rejection as incomplete.)

ACK ID _____

Financial Statements and Report of Independent Certified Public Accountants

Retina Consultants of America 401(k) Plan

December 31, 2025 and 2024

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* All other schedules are omitted as they are not required based on disclosure requirements of the Employee Retirement Security Act of 1974 (ERISA), as amended, and applicable regulations issued by the U.S. Department of Labor.

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REPORT OF INDEPENDENT CERTIFIED PUBLIC ACCOUNTANTS

Trustees
Retina Consultants of America 401(k) Plan

Scope and nature of the ERISA Section 103(a)(3)(C) audit
We have performed audits of the financial statements of Retina Consultants of America 401(k) Plan (the "Plan"), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), as permitted by ERISA Section 103(a)(3)(C) (ERISA Section 103(a)(3)(C) audit). The financial statements comprise the statements of net assets available for benefits as of December 31, 2025 and 2024, and the related statement of changes in net assets available for plan benefits for the year ended December 31, 2025, and the related notes to the financial statements.

Management, having determined it is permissible in the circumstances, has elected to have the audits of the Plan's financial statements performed in accordance with ERISA Section 103(a)(3)(C) pursuant to 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. As permitted by ERISA Section 103(a)(3)(C), our audits need not extend to any statements or information related to assets held for investment of the plan (investment information) by a bank or similar institution or insurance carrier that is regulated, supervised, and subject to periodic examination by a state or federal agency, provided that the statements or information regarding assets so held are prepared and certified to by the bank or similar institution or insurance carrier in accordance with 29 CFR 2520.103-5 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA (qualified institution).

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

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

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

Grant Thornton LLP is a U.S. member firm of Grant Thornton International Ltd (GTIL). GTIL and each of its member firms are separate legal entities and are not a worldwide partnership.

Basis for opinion
We conducted our audits in accordance with auditing standards generally accepted in the United States of America (US GAAS). Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of the Plan and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our ERISA Section 103(a)(3)(C) audit opinion.

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

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

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

Auditor’s responsibilities for the audit of the financial statements
Except as described in the Scope and Nature of the ERISA Section 103(a)(3)(C) Audit section of our report, our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with US GAAS will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with US GAAS, we:

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

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Plan's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan's ability to continue as a going concern for a reasonable period of time.

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

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

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

Other matter – supplemental schedules required by ERISA
The supplemental schedule of delinquent participant contributions for the year ended December 31, 2025 and schedule of assets (held at end of year) as of December 31, 2025 are presented for purposes of additional analysis and are not a required part of the financial statements but are supplementary information required by the Department of Labor’s Rules and Regulations for Reporting and Disclosure under ERISA. Such supplementary information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedules, other than that agreed to or derived from the certified investment information, has been subjected to the auditing procedures applied in the audits of the financial statements and certain additional procedures. These additional procedures included comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with US GAAS. For information included in the supplemental schedules that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

Grant Thornton

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

In our opinion

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

Grant Thornton LLP

Philadelphia, Pennsylvania
October 9, 2026

Retina Consultants of America 401(k) Plan

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

December 31,

	2025	2024
ASSETS		
Investments, at fair value	$ 445,612,994	$ 351,294,020
Employer contribution receivable	21,179,547	17,435,748
Employee contribution receivable	27,282	29,850
Notes receivable from participants	2,681,325	1,875,473
Total assets	469,501,148	370,635,091
NET ASSETS AVAILABLE FOR BENEFITS	$ 469,501,148	$ 370,635,091

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

Retina Consultants of America 401(k) Plan

STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

Year ended December 31, 2025

Additions	
Investment income	
Net appreciation in fair value of investments	$ 44,629,660
Interest and dividends	18,907,430
Net investment income	63,537,090
Interest income on notes receivable from participants	186,202
Contributions	
Employee	21,439,686
Employer	22,924,166
Rollovers	11,906,756
Total contributions	56,270,608
Total additions	119,993,900
Deductions	
Benefits paid to participants	32,933,116
Administrative expenses	520,739
Total deductions	33,453,855
NET INCREASE IN NET ASSETS AVAILABLE FOR BENEFITS BEFORE TRANSFERS TO THE PLAN	86,540,045
Transfers to the Plan	12,326,012
Net assets available for benefits	
Beginning of year	370,635,091
End of year	$ 469,501,148

The accompanying notes are an integral part of this financial statement.

NOTE 1 - DESCRIPTION OF PLAN

The following description of Retina Consultants of America 401(k) Plan (the "Plan") provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

General

The Plan is a defined contribution (participant-directed) plan established by Retina Group, Inc. DBA Retina Consultants of America (the "Employer" or "Company"). The Plan was established on July 1, 2021. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974, as amended ("ERISA").

The Company supports premier retina practices (the "Practices") across the country. Practices are added to the Plan at varying times throughout the year as participating employers. These Practices either previously sponsored their own defined contribution plan or participated in a Professional Employer Organization defined contribution plan. Such plans were either terminated prior to the Practices joining the Company and these plans' participants' balances were rollovers into this plan or were merged into the Plan and these plan balances were transferred into this plan. Upon entrance into the Plan, the Practices adopted the provisions of the Plan. The total amount of transfers into the Plan from the Practices' plans was $12,326,012.

Eligibility

All employees of the Company or participating employers are eligible to participate in the Plan immediately upon hire. The exceptions to eligible employees are non-resident aliens with no income from a U.S. source, residents of Puerto Rico, those covered by a collective bargaining agreement, and leased employees. The prior plans of the Practices that have merged into the Plan may have had other eligibility provisions. Once the prior plans of the Practices merged into the Plan, they adopted the Plan's eligibility provisions.

Participants become eligible to participate in the Plan according to the table below:

Contribution Type	Age Requirement	Service Requirement	Entry Date
Employee deferral contributions and qualified non-elective contributions	18	None	Immediate upon meeting all eligibility requirements
Employer matching contributions	18	12 month(s)	Immediate upon meeting all eligibility requirements
Employer non-elective contributions	18	12 month(s)	Immediate upon meeting all eligibility requirements
Safe harbor nonelective contributions	18	12 month(s)	Immediate upon meeting all eligibility requirements

The participant, once eligible, remains eligible to participate in the Plan until termination of employment or becoming a member of a class of employees excluded from the Plan. If the participant terminates employment after eligibility is met, and is later re-employed, the participant is eligible to re-enter the Plan upon completion of one hour of service.

Contributions

Participants may elect to defer a pre-tax or Roth percentage of their eligible compensation into the Plan. The percentage of eligible compensation the participant elects will be withheld from each payroll and contributed to an account in the Plan on the participant's behalf. For contributions withheld from the participant's eligible compensation, the percentage deferred is subject to an annual limit of the lesser of 80% of eligible compensation or $23,500 (in 2025; thereafter as adjusted by the Secretary of the Treasury) in a plan year. Participants who are projected to be age 50 or older by the end of the taxable year and who are making deferral contributions to the Plan may also make a catch-up contribution of up to $7,500 (in 2025; thereafter as adjusted by the Secretary of the Treasury).

The Plan also contains a 3% automatic enrollment feature. The participant may stop or change this automatic contribution. Automatic deferral contributions are treated in the same manner as participant-elected deferral contributions.

The Employer has elected to make safe harbor nonelective contributions to all eligible participants in an amount equal to 3% of eligible compensation. Compensation used for employer contributions under the Plan is limited to the Internal Revenue Service ("IRS") limits in effect. For the 2025 Plan year, the maximum compensation that can be considered for employer contributions is $350,000. Participants become eligible for safe harbor nonelective contributions only if they make deferral contributions. The Plan includes a discretionary employer match for eligible participants. The eligible participant allocable share of the discretionary match employer contribution is a percentage of the eligible compensation made by the participant during the contribution period. For the Plan year ended December 31, 2025, there were no discretionary employer match. The Employer may also make additional discretionary nonelective contributions to eligible participants. Certain practices had discretionary nonelective contributions which totaled approximately $3,219,602 as of December 31, 2025.

Participants, eligible employees who have not yet satisfied the Plan's eligibility criteria, and inactive participants who have not terminated employment can roll over part or all of an eligible rollover distribution received from an eligible retirement plan into this Plan. The Plan also allows participants to make in-plan Roth rollover contributions and in-plan Roth conversions.

Participant Accounts

Each participant's account is credited with the participant's contributions and employer contributions and are adjusted for investment earnings and/or losses. Accounts are also charged with an allocation of administrative expenses. Allocations are based on Plan terms. The benefit to which a participant is entitled is based on the amount contained in the individual's vested account.

Participants direct the investment of their account balance into various investment options offered by the Plan and may change their investment options at any time, subject to the terms of the Plan.

Fund fees are charged to participants' accounts as a reduction of the return earned on each investment option.

Vesting Provisions

Participants are 100% vested in their rollover contributions, qualified nonelective contributions, deferral contributions, safe harbor nonelective employer contributions, and any earnings thereon. Discretionary employer matching contributions and discretionary employer nonelective contributions and any earnings thereon will be vested in accordance with the Plan's vesting schedule. Participants receive vesting credit for the number of years worked for their employer and any related employer. A participant with less than two years of service is 0% vested.

Vesting increases by 20% each year and a participant is 100% vested after six years of service. Prior vesting schedules may apply to various participant accounts that merged into the Plan.

Notes Receivable From Participants

The Plan allows participants to borrow amounts not to exceed the lesser of (a) $50,000 reduced by the excess of the highest outstanding balance of loans from the Plan to the participant or beneficiary during the prior one-year period over the outstanding loan balance as of the date such loan is made, or (b) 50% of the vested interest in the participant's account. The loans are secured by the balance in the participant's account. The loan interest rate shall bear a reasonable rate of interest as determined by the Plan Administrator based on prevailing interest rates. Principal and interest is paid ratably through payroll deductions. Loans are required to be repaid over not more than five years unless the loan is used to acquire a principal place of residence, in which case the repayment period cannot exceed 10 years. A participant may have one loan outstanding at the same time.

Payment of Benefits

Upon termination of service, retirement, death or total permanent disability, a participant may elect to receive a distribution of their entire accumulated Plan balance, subject to the terms of the Plan. Distribution options include lump-sum payments, partial payments, annuities, or installments. Participants may elect in-service withdrawals of their elective deferral account balance for hardship purposes. Participants may request an in-service distribution from all vested accounts at age 59½, or from certain other accounts after meeting certain criteria. Minimum distributions are required for participants who have reached the required age per IRS regulations. In the case of participant death, payment(s) of the vested value of the participants' account will be made to a beneficiary as designated by the participant.

Forfeited Accounts

Forfeitures arising during the Plan year are used to pay administrative expenses under the Plan at any time. Any forfeitures not used to pay administrative expenses under the Plan shall be applied to reduce the Employer contributions or allocated to participant accounts. Forfeitures of terminated non-vested participant accounts in the amount of $459,457 were used to reduce employer contributions in 2025. Forfeiture balances were $291,056 and $516,463 for the Plan years ended December 31, 2025 and 2024, respectively.

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

A summary of significant accounting policies follows:

Basis of Accounting

The Plan's financial statements are prepared using the accrual basis of accounting in conformity with accounting principles generally accepted in the United States of America ("U.S. GAAP").

Investments Valuation and Income Recognition

The Plan's investments are reported at fair value. Fair value is defined as 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 5 for discussion of fair value measurements.

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

Notes Receivable From Participants

Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Interest income is recorded on the accrual basis. Related fees are recorded as administrative expenses and are expensed when they are incurred. Related fees consist of quarterly maintenance fees and set up fees for loans.

Use of Estimates

The preparation of financial statements in conformity with U.S. GAAP requires management to make estimates and assumptions. These estimates and assumptions affect the reported amounts of Plan assets, liabilities, and changes therein and disclosure of contingent assets and liabilities. Actual results could differ from those estimates.

Payment of Benefits

Benefits are recorded when paid.

Administrative Expenses

Most costs, fees, and other administrative expenses are paid from the Plan and are allocated to participant accounts in the Plan. Certain expenses of maintaining the Plan are paid by the Plan, unless otherwise paid by the Company. Expenses that are paid by the Company are excluded from these financial statements.

Investment Fees

Investment fees are netted against investment income.

NOTE 3 - INFORMATION CERTIFIED BY THE TRUSTEE

The Plan Administrator has elected the method of annual reporting compliance permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, Fidelity Management Trust Company has certified that the following data included in the financial statements and supplementary schedule is complete and accurate:

- Investments at fair value and notes receivable from participants, as shown in the statements of net assets available for benefits as of December 31, 2025 and 2024.
- Investment income and interest income on notes receivable from participants, as shown in the statement of changes in net assets available for benefits for the year ended December 31, 2025.
- Schedule of assets (held at end of year) as of December 31, 2025.

NOTE 4 - FAIR VALUE MEASUREMENTS

U.S. GAAP establishes a framework for measuring fair value. The framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1) and the lowest priority to unobservable inputs (Level 3). The three levels of the fair value hierarchy are described as follows:

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

Level 2 - Inputs to the valuation methodology include:

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

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

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

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

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

Registered investment companies: Valued at the daily closing price as reported by the fund. Funds held by the Plan are registered with the Securities and Exchange Commission. These funds are required to publish their daily net asset value ("NAV") and to transact at that price. These funds held by the Plan are deemed to be actively traded.

Self-directed brokerage accounts: Accounts primarily consist of registered investment companies, bond funds, and common stocks that are valued on the basis of readily determinable market prices.

Collective trust funds: Valued at the NAV of units of the collective trust. The NAV is used as a practical expedient to estimate fair value. Participant transactions, purchases and sales, may occur daily. The collective investment funds provide for daily redemptions by the Plan at reported NAV per share, with no advance notice requirement. These funds are included as a reconciling item to the fair value table. There are no unfunded commitments.

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

	2025			
	Level 1	Level 2	Level 3	Total
Registered investment companies	$ 365,835,229	$ -	$ -	$ 365,835,229
Self-directed brokerage accounts	52,098,838	-	-	52,098,838
Subtotal	$ 417,934,067	$ -	$ -	417,934,067
Investments valued at NAV				27,678,927
Total investments, at fair value				$ 445,612,994

	2024			
	Level 1	Level 2	Level 3	Total
Registered investment companies	$ 306,070,373	$ -	$ -	$ 306,070,373
Self-directed brokerage accounts	38,802,317	-	-	38,802,317
Subtotal	$ 344,872,690	$ -	$ -	344,872,690
Investments valued at NAV				6,421,330
Total investments, at fair value				$ 351,294,020

NOTE 5 - TAX STATUS

The Plan utilizes a volume submitter document sponsored by Fidelity Management Research Company ("Fidelity"). Fidelity obtained its latest opinion letter on June 30, 2020, in which the IRS stated that the Plan was designed in accordance with the applicable sections of the Internal Revenue Code (the "IRC"). Although the Plan has been amended since receiving the opinion letter, the Company believes that the Plan is designed, and is currently being operated, in compliance with the applicable requirements of the IRC and, therefore, believes that the Plan is qualified and the related trust is tax-exempt.

The Company has identified certain operational errors for the years ended December 31, 2025 and 2024 and intends to correct these errors under the IRS' Employee Plans Compliance Resolution System. The corrective action is not expected to be significant to the Plan. The Company believes that the resolution of the errors will have no impact on the Plan's tax status.

U.S. GAAP requires plan management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the IRS. The Plan Administrator has analyzed the tax positions taken by the Plan and

has concluded that as of December 31, 2025 and 2024, there are no uncertain positions taken or expected to be taken that would require recognition of a liability (or asset) or disclosure in the financial statements.

The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

NOTE 6 - RELATED-PARTY AND PARTY IN INTEREST TRANSACTIONS

Certain Plan investments are managed by Fidelity or an affiliate thereof. Fidelity is the trustee and recordkeeper for the Plan and these transactions qualify as party in interest transactions. Certain administrative functions are performed by officers and employees of the Company. No officer or employee receives compensation from the Plan for these services. Certain administrative fees related to the administration of the Plan are paid by the Plan or by the Company. Expenses paid by the Company are excluded from these financial statements. Notes receivable from participants held by the Plan are also considered party-in-interest transactions.

Such transactions are permitted under the provisions of the Plan and are exempt from the prohibited transactions rules under ERISA.

During the Plan years ended on December 31, 2025 and 2024, the Company inadvertently failed to deposit participant deferrals within the required timeframe as stated by the United States Department of Labor (“DOL”) regulations. The DOL considers late deposits to be non-exempt prohibited transactions. The Company is in the process of correcting the 2025 late contributions and has corrected the 2024 late contributions. Any lost earnings and excise tax payments, if applicable, will be made from the Company’s assets and not from assets of the Plan.

NOTE 7 - PLAN TERMINATION

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

NOTE 8 - RISKS AND UNCERTAINTIES

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

NOTE 9 - RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500

The following is a reconciliation of net assets available for benefits per the financial statements at December 31, 2025 and 2024, to Form 5500:

	2025	2024
Net assets available for benefits per the financial statements	$ 469,501,148	$ 370,635,091
Current year employer contribution receivable	-	(17,435,748)
Current year employee contribution receivable	-	(29,850)
Net assets per Form 5500	$ 469,501,148	$ 353,169,493

The following is a reconciliation of the net increase in net assets available for benefits per the financial statements for the year ended December 31, 2025, to Form 5500:

	2025
Net increase in net assets available for benefits per the financial statements	$ 86,540,045
Prior year employer contribution receivable	17,435,748
Prior year employee contribution receivable	29,850
Net increase per Form 5500	$ 104,005,643

NOTE 11 - SUBSEQUENT EVENTS

Management has completed its evaluation of potential subsequent events. This evaluation was completed through October 9, 2026, the date the financial statements were available to be issued. The Plan will continue to have Practices join the Plan from time to time. Effective December 31, 2026, this Plan will merge into the Cencora Employee Investment Plan. Participant account balances will transfer to the Fidelity Freedom Blend Commingled Pool Class T target date fund that has a target retirement date closest to the year the participant assumes a retirement age of 65. BrokerageLink investment option is not available in the Cencora Plan and as such, participants holdings will liquidate into the Fidelity Government Money Market Fund. Participants will be given the opportunity to enroll in the Cencora Plan for future contributions in January 2027. If participants do not enroll within 90 days, they will be automatically enrolled at 5% pre-tax deductions and invested in a corresponding target date default investment option.

SUPPLEMENTAL SCHEDULES

Retina Consultants of America 401(k) Plan

SCHEDULE H, LINE 4(a) - SCHEDULE OF DELINQUENT PARTICIPANT CONTRIBUTIONS

Year ended December 31, 2025

EMPLOYER ID NO: 84-3983059, PLAN #: 001

	Participant Contributions Transferred Late to Plan	Total That Constitute Nonexempt Prohibited Transactions			
	Check Here if Late Participant Loan Repayments are Included: X	Contributions Not Corrected	Contributions Corrected Outside of VFCP	Contributions Pending Correction in VFCP	Total Fully Corrected Under VFCP and PTE 2002-51
2025	$ 90,364	$ 90,364	$ -	$ -	$ -
2024	$ 1,575,596	$ -	$ 1,575,596	$ -	$ -

Retina Consultants of America 401(k) Plan

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

December 31, 2025

EMPLOYER ID NO: 84-3983059, PLAN #: 001

(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
	GG FKLN SM CAP VAL	Collective Trust Fund	**	$ 1,206,452
	AB US LG CP GR CIT L	Collective Trust Fund	**	9,825,865
	PUTNAM STABLE VALUE	Collective Trust Fund	**	3,601,075
	JH CR PL FXD INC 12	Collective Trust Fund	**	3,451,593
	PIF MID CAP EQ IV	Collective Trust Fund	**	1,275,609
	VANG RET SAV TRUST	Collective Trust Fund	**	158,657
	JH DSCPL VAL MDCP B5	Collective Trust Fund	**	2,842,138
	PUTN LG CP VAL TR IA	Collective Trust Fund	**	5,033,292
	ML SV SOLUTIONS L	Collective Trust Fund	**	284,246
		Total Collective Trust Fund		27,678,927
	AF TD INCOME 2010 R6	Registered Investment Company	**	1,539,681
	AF TD INCOME 2020 R6	Registered Investment Company	**	5,068,839
	AF TRGT DATE 2030 R6	Registered Investment Company	**	38,551,153
	AF TRGT DATE 2040 R6	Registered Investment Company	**	39,175,256
	AF TRGT DATE 2050 R6	Registered Investment Company	**	23,915,263
	AF TD INCOME 2015 R6	Registered Investment Company	**	2,261,875
	AF TD INCOME 2025 R6	Registered Investment Company	**	32,113,661
	AF TRGT DATE 2035 R6	Registered Investment Company	**	32,150,560
	AF TRGT DATE 2045 R6	Registered Investment Company	**	36,826,269
	AF TRGT DATE 2055 R6	Registered Investment Company	**	17,637,043
	AF TRGT DATE 2065 R6	Registered Investment Company	**	6,431,339
	HTFD STRAT INC R6	Registered Investment Company	**	3,135,324
	AF TRGT DATE 2060 R6	Registered Investment Company	**	10,384,492
	MFS INTL DIVRSN R6	Registered Investment Company	**	4,119,253
	J H GLOBAL RE N	Registered Investment Company	**	975,724
*	FID US BOND IDX	Registered Investment Company	**	9,577,198
*	FID 500 INDEX	Registered Investment Company	**	73,319,166
*	FID MID CAP IDX	Registered Investment Company	**	7,150,967
*	FID SM CAP IDX	Registered Investment Company	**	6,657,113
*	FID TOTAL INTL IDX	Registered Investment Company	**	10,450,627
*	FID SMALL CAP GR K6	Registered Investment Company	**	3,262,984
*	FID GOVT MMKT K6	Registered Investment Company	**	1,131,442
		Total Registered Investment Company		365,835,229
*	Brokeragelink	Self-Directed Brokerage Accounts including certain Fidelity investment funds	**	52,098,838
		Total investments, at fair value		445,612,994
*	Participant Loans	Interest rates ranging from 4.25% to 9.50% maturity dates through 2037	**	2,681,325
				$ 448,294,319

* Party-in-interest to the Plan.

** Cost omitted for participant-directed investments.

Financial Statements and Report of Independent Certified Public Accountants

Retina Consultants of America 401(k) Plan

December 31, 2025 and 2024

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* All other schedules are omitted as they are not required based on disclosure requirements of the Employee Retirement Security Act of 1974 (ERISA), as amended, and applicable regulations issued by the U.S. Department of Labor.

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REPORT OF INDEPENDENT CERTIFIED PUBLIC ACCOUNTANTS

Trustees
Retina Consultants of America 401(k) Plan

Scope and nature of the ERISA Section 103(a)(3)(C) audit
We have performed audits of the financial statements of Retina Consultants of America 401(k) Plan (the "Plan"), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), as permitted by ERISA Section 103(a)(3)(C) (ERISA Section 103(a)(3)(C) audit). The financial statements comprise the statements of net assets available for benefits as of December 31, 2025 and 2024, and the related statement of changes in net assets available for plan benefits for the year ended December 31, 2025, and the related notes to the financial statements.

Management, having determined it is permissible in the circumstances, has elected to have the audits of the Plan's financial statements performed in accordance with ERISA Section 103(a)(3)(C) pursuant to 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. As permitted by ERISA Section 103(a)(3)(C), our audits need not extend to any statements or information related to assets held for investment of the plan (investment information) by a bank or similar institution or insurance carrier that is regulated, supervised, and subject to periodic examination by a state or federal agency, provided that the statements or information regarding assets so held are prepared and certified to by the bank or similar institution or insurance carrier in accordance with 29 CFR 2520.103-5 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA (qualified institution).

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

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

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

Grant Thornton LLP is a U.S. member firm of Grant Thornton International Ltd (GTIL). GTIL and each of its member firms are separate legal entities and are not a worldwide partnership.

Basis for opinion
We conducted our audits in accordance with auditing standards generally accepted in the United States of America (US GAAS). Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of the Plan and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our ERISA Section 103(a)(3)(C) audit opinion.

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

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

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

Auditor’s responsibilities for the audit of the financial statements
Except as described in the Scope and Nature of the ERISA Section 103(a)(3)(C) Audit section of our report, our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with US GAAS will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with US GAAS, we:

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

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Plan's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan's ability to continue as a going concern for a reasonable period of time.

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

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

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

Other matter – supplemental schedules required by ERISA
The supplemental schedule of delinquent participant contributions for the year ended December 31, 2025 and schedule of assets (held at end of year) as of December 31, 2025 are presented for purposes of additional analysis and are not a required part of the financial statements but are supplementary information required by the Department of Labor’s Rules and Regulations for Reporting and Disclosure under ERISA. Such supplementary information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedules, other than that agreed to or derived from the certified investment information, has been subjected to the auditing procedures applied in the audits of the financial statements and certain additional procedures. These additional procedures included comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with US GAAS. For information included in the supplemental schedules that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

Grant Thornton

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

In our opinion

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

Grant Thornton LLP

Philadelphia, Pennsylvania
October 9, 2026

Retina Consultants of America 401(k) Plan

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

December 31,

	2025	2024
ASSETS		
Investments, at fair value	$ 445,612,994	$ 351,294,020
Employer contribution receivable	21,179,547	17,435,748
Employee contribution receivable	27,282	29,850
Notes receivable from participants	2,681,325	1,875,473
Total assets	469,501,148	370,635,091
NET ASSETS AVAILABLE FOR BENEFITS	$ 469,501,148	$ 370,635,091

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

Retina Consultants of America 401(k) Plan

STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

Year ended December 31, 2025

Additions	
Investment income	
Net appreciation in fair value of investments	$ 44,629,660
Interest and dividends	18,907,430
Net investment income	63,537,090
Interest income on notes receivable from participants	186,202
Contributions	
Employee	21,439,686
Employer	22,924,166
Rollovers	11,906,756
Total contributions	56,270,608
Total additions	119,993,900
Deductions	
Benefits paid to participants	32,933,116
Administrative expenses	520,739
Total deductions	33,453,855
NET INCREASE IN NET ASSETS AVAILABLE FOR BENEFITS BEFORE TRANSFERS TO THE PLAN	86,540,045
Transfers to the Plan	12,326,012
Net assets available for benefits	
Beginning of year	370,635,091
End of year	$ 469,501,148

The accompanying notes are an integral part of this financial statement.

NOTE 1 - DESCRIPTION OF PLAN

The following description of Retina Consultants of America 401(k) Plan (the "Plan") provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

General

The Plan is a defined contribution (participant-directed) plan established by Retina Group, Inc. DBA Retina Consultants of America (the "Employer" or "Company"). The Plan was established on July 1, 2021. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974, as amended ("ERISA").

The Company supports premier retina practices (the "Practices") across the country. Practices are added to the Plan at varying times throughout the year as participating employers. These Practices either previously sponsored their own defined contribution plan or participated in a Professional Employer Organization defined contribution plan. Such plans were either terminated prior to the Practices joining the Company and these plans' participants' balances were rollovers into this plan or were merged into the Plan and these plan balances were transferred into this plan. Upon entrance into the Plan, the Practices adopted the provisions of the Plan. The total amount of transfers into the Plan from the Practices' plans was $12,326,012.

Eligibility

All employees of the Company or participating employers are eligible to participate in the Plan immediately upon hire. The exceptions to eligible employees are non-resident aliens with no income from a U.S. source, residents of Puerto Rico, those covered by a collective bargaining agreement, and leased employees. The prior plans of the Practices that have merged into the Plan may have had other eligibility provisions. Once the prior plans of the Practices merged into the Plan, they adopted the Plan's eligibility provisions.

Participants become eligible to participate in the Plan according to the table below:

Contribution Type	Age Requirement	Service Requirement	Entry Date
Employee deferral contributions and qualified non-elective contributions	18	None	Immediate upon meeting all eligibility requirements
Employer matching contributions	18	12 month(s)	Immediate upon meeting all eligibility requirements
Employer non-elective contributions	18	12 month(s)	Immediate upon meeting all eligibility requirements
Safe harbor nonelective contributions	18	12 month(s)	Immediate upon meeting all eligibility requirements

The participant, once eligible, remains eligible to participate in the Plan until termination of employment or becoming a member of a class of employees excluded from the Plan. If the participant terminates employment after eligibility is met, and is later re-employed, the participant is eligible to re-enter the Plan upon completion of one hour of service.

Contributions

Participants may elect to defer a pre-tax or Roth percentage of their eligible compensation into the Plan. The percentage of eligible compensation the participant elects will be withheld from each payroll and contributed to an account in the Plan on the participant's behalf. For contributions withheld from the participant's eligible compensation, the percentage deferred is subject to an annual limit of the lesser of 80% of eligible compensation or $23,500 (in 2025; thereafter as adjusted by the Secretary of the Treasury) in a plan year. Participants who are projected to be age 50 or older by the end of the taxable year and who are making deferral contributions to the Plan may also make a catch-up contribution of up to $7,500 (in 2025; thereafter as adjusted by the Secretary of the Treasury).

The Plan also contains a 3% automatic enrollment feature. The participant may stop or change this automatic contribution. Automatic deferral contributions are treated in the same manner as participant-elected deferral contributions.

The Employer has elected to make safe harbor nonelective contributions to all eligible participants in an amount equal to 3% of eligible compensation. Compensation used for employer contributions under the Plan is limited to the Internal Revenue Service ("IRS") limits in effect. For the 2025 Plan year, the maximum compensation that can be considered for employer contributions is $350,000. Participants become eligible for safe harbor nonelective contributions only if they make deferral contributions. The Plan includes a discretionary employer match for eligible participants. The eligible participant allocable share of the discretionary match employer contribution is a percentage of the eligible compensation made by the participant during the contribution period. For the Plan year ended December 31, 2025, there were no discretionary employer match. The Employer may also make additional discretionary nonelective contributions to eligible participants. Certain practices had discretionary nonelective contributions which totaled approximately $3,219,602 as of December 31, 2025.

Participants, eligible employees who have not yet satisfied the Plan's eligibility criteria, and inactive participants who have not terminated employment can roll over part or all of an eligible rollover distribution received from an eligible retirement plan into this Plan. The Plan also allows participants to make in-plan Roth rollover contributions and in-plan Roth conversions.

Participant Accounts

Each participant's account is credited with the participant's contributions and employer contributions and are adjusted for investment earnings and/or losses. Accounts are also charged with an allocation of administrative expenses. Allocations are based on Plan terms. The benefit to which a participant is entitled is based on the amount contained in the individual's vested account.

Participants direct the investment of their account balance into various investment options offered by the Plan and may change their investment options at any time, subject to the terms of the Plan.

Fund fees are charged to participants' accounts as a reduction of the return earned on each investment option.

Vesting Provisions

Participants are 100% vested in their rollover contributions, qualified nonelective contributions, deferral contributions, safe harbor nonelective employer contributions, and any earnings thereon. Discretionary employer matching contributions and discretionary employer nonelective contributions and any earnings thereon will be vested in accordance with the Plan's vesting schedule. Participants receive vesting credit for the number of years worked for their employer and any related employer. A participant with less than two years of service is 0% vested.

Vesting increases by 20% each year and a participant is 100% vested after six years of service. Prior vesting schedules may apply to various participant accounts that merged into the Plan.

Notes Receivable From Participants

The Plan allows participants to borrow amounts not to exceed the lesser of (a) $50,000 reduced by the excess of the highest outstanding balance of loans from the Plan to the participant or beneficiary during the prior one-year period over the outstanding loan balance as of the date such loan is made, or (b) 50% of the vested interest in the participant's account. The loans are secured by the balance in the participant's account. The loan interest rate shall bear a reasonable rate of interest as determined by the Plan Administrator based on prevailing interest rates. Principal and interest is paid ratably through payroll deductions. Loans are required to be repaid over not more than five years unless the loan is used to acquire a principal place of residence, in which case the repayment period cannot exceed 10 years. A participant may have one loan outstanding at the same time.

Payment of Benefits

Upon termination of service, retirement, death or total permanent disability, a participant may elect to receive a distribution of their entire accumulated Plan balance, subject to the terms of the Plan. Distribution options include lump-sum payments, partial payments, annuities, or installments. Participants may elect in-service withdrawals of their elective deferral account balance for hardship purposes. Participants may request an in-service distribution from all vested accounts at age 59½, or from certain other accounts after meeting certain criteria. Minimum distributions are required for participants who have reached the required age per IRS regulations. In the case of participant death, payment(s) of the vested value of the participants' account will be made to a beneficiary as designated by the participant.

Forfeited Accounts

Forfeitures arising during the Plan year are used to pay administrative expenses under the Plan at any time. Any forfeitures not used to pay administrative expenses under the Plan shall be applied to reduce the Employer contributions or allocated to participant accounts. Forfeitures of terminated non-vested participant accounts in the amount of $459,457 were used to reduce employer contributions in 2025. Forfeiture balances were $291,056 and $516,463 for the Plan years ended December 31, 2025 and 2024, respectively.

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

A summary of significant accounting policies follows:

Basis of Accounting

The Plan's financial statements are prepared using the accrual basis of accounting in conformity with accounting principles generally accepted in the United States of America ("U.S. GAAP").

Investments Valuation and Income Recognition

The Plan's investments are reported at fair value. Fair value is defined as 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 5 for discussion of fair value measurements.

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

Notes Receivable From Participants

Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Interest income is recorded on the accrual basis. Related fees are recorded as administrative expenses and are expensed when they are incurred. Related fees consist of quarterly maintenance fees and set up fees for loans.

Use of Estimates

The preparation of financial statements in conformity with U.S. GAAP requires management to make estimates and assumptions. These estimates and assumptions affect the reported amounts of Plan assets, liabilities, and changes therein and disclosure of contingent assets and liabilities. Actual results could differ from those estimates.

Payment of Benefits

Benefits are recorded when paid.

Administrative Expenses

Most costs, fees, and other administrative expenses are paid from the Plan and are allocated to participant accounts in the Plan. Certain expenses of maintaining the Plan are paid by the Plan, unless otherwise paid by the Company. Expenses that are paid by the Company are excluded from these financial statements.

Investment Fees

Investment fees are netted against investment income.

NOTE 3 - INFORMATION CERTIFIED BY THE TRUSTEE

The Plan Administrator has elected the method of annual reporting compliance permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, Fidelity Management Trust Company has certified that the following data included in the financial statements and supplementary schedule is complete and accurate:

- Investments at fair value and notes receivable from participants, as shown in the statements of net assets available for benefits as of December 31, 2025 and 2024.
- Investment income and interest income on notes receivable from participants, as shown in the statement of changes in net assets available for benefits for the year ended December 31, 2025.
- Schedule of assets (held at end of year) as of December 31, 2025.

NOTE 4 - FAIR VALUE MEASUREMENTS

U.S. GAAP establishes a framework for measuring fair value. The framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1) and the lowest priority to unobservable inputs (Level 3). The three levels of the fair value hierarchy are described as follows:

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

Level 2 - Inputs to the valuation methodology include:

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

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

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

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

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

Registered investment companies: Valued at the daily closing price as reported by the fund. Funds held by the Plan are registered with the Securities and Exchange Commission. These funds are required to publish their daily net asset value ("NAV") and to transact at that price. These funds held by the Plan are deemed to be actively traded.

Self-directed brokerage accounts: Accounts primarily consist of registered investment companies, bond funds, and common stocks that are valued on the basis of readily determinable market prices.

Collective trust funds: Valued at the NAV of units of the collective trust. The NAV is used as a practical expedient to estimate fair value. Participant transactions, purchases and sales, may occur daily. The collective investment funds provide for daily redemptions by the Plan at reported NAV per share, with no advance notice requirement. These funds are included as a reconciling item to the fair value table. There are no unfunded commitments.

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

	2025			
	Level 1	Level 2	Level 3	Total
Registered investment companies	$ 365,835,229	$ -	$ -	$ 365,835,229
Self-directed brokerage accounts	52,098,838	-	-	52,098,838
Subtotal	$ 417,934,067	$ -	$ -	417,934,067
Investments valued at NAV				27,678,927
Total investments, at fair value				$ 445,612,994

	2024			
	Level 1	Level 2	Level 3	Total
Registered investment companies	$ 306,070,373	$ -	$ -	$ 306,070,373
Self-directed brokerage accounts	38,802,317	-	-	38,802,317
Subtotal	$ 344,872,690	$ -	$ -	344,872,690
Investments valued at NAV				6,421,330
Total investments, at fair value				$ 351,294,020

NOTE 5 - TAX STATUS

The Plan utilizes a volume submitter document sponsored by Fidelity Management Research Company ("Fidelity"). Fidelity obtained its latest opinion letter on June 30, 2020, in which the IRS stated that the Plan was designed in accordance with the applicable sections of the Internal Revenue Code (the "IRC"). Although the Plan has been amended since receiving the opinion letter, the Company believes that the Plan is designed, and is currently being operated, in compliance with the applicable requirements of the IRC and, therefore, believes that the Plan is qualified and the related trust is tax-exempt.

The Company has identified certain operational errors for the years ended December 31, 2025 and 2024 and intends to correct these errors under the IRS' Employee Plans Compliance Resolution System. The corrective action is not expected to be significant to the Plan. The Company believes that the resolution of the errors will have no impact on the Plan's tax status.

U.S. GAAP requires plan management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the IRS. The Plan Administrator has analyzed the tax positions taken by the Plan and

has concluded that as of December 31, 2025 and 2024, there are no uncertain positions taken or expected to be taken that would require recognition of a liability (or asset) or disclosure in the financial statements.

The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

NOTE 6 - RELATED-PARTY AND PARTY IN INTEREST TRANSACTIONS

Certain Plan investments are managed by Fidelity or an affiliate thereof. Fidelity is the trustee and recordkeeper for the Plan and these transactions qualify as party in interest transactions. Certain administrative functions are performed by officers and employees of the Company. No officer or employee receives compensation from the Plan for these services. Certain administrative fees related to the administration of the Plan are paid by the Plan or by the Company. Expenses paid by the Company are excluded from these financial statements. Notes receivable from participants held by the Plan are also considered party-in-interest transactions.

Such transactions are permitted under the provisions of the Plan and are exempt from the prohibited transactions rules under ERISA.

During the Plan years ended on December 31, 2025 and 2024, the Company inadvertently failed to deposit participant deferrals within the required timeframe as stated by the United States Department of Labor (“DOL”) regulations. The DOL considers late deposits to be non-exempt prohibited transactions. The Company is in the process of correcting the 2025 late contributions and has corrected the 2024 late contributions. Any lost earnings and excise tax payments, if applicable, will be made from the Company’s assets and not from assets of the Plan.

NOTE 7 - PLAN TERMINATION

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

NOTE 8 - RISKS AND UNCERTAINTIES

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

NOTE 9 - RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500

The following is a reconciliation of net assets available for benefits per the financial statements at December 31, 2025 and 2024, to Form 5500:

	2025	2024
Net assets available for benefits per the financial statements	$ 469,501,148	$ 370,635,091
Current year employer contribution receivable	-	(17,435,748)
Current year employee contribution receivable	-	(29,850)
Net assets per Form 5500	$ 469,501,148	$ 353,169,493

The following is a reconciliation of the net increase in net assets available for benefits per the financial statements for the year ended December 31, 2025, to Form 5500:

	2025
Net increase in net assets available for benefits per the financial statements	$ 86,540,045
Prior year employer contribution receivable	17,435,748
Prior year employee contribution receivable	29,850
Net increase per Form 5500	$ 104,005,643

NOTE 11 - SUBSEQUENT EVENTS

Management has completed its evaluation of potential subsequent events. This evaluation was completed through October 9, 2026, the date the financial statements were available to be issued. The Plan will continue to have Practices join the Plan from time to time. Effective December 31, 2026, this Plan will merge into the Cencora Employee Investment Plan. Participant account balances will transfer to the Fidelity Freedom Blend Commingled Pool Class T target date fund that has a target retirement date closest to the year the participant assumes a retirement age of 65. BrokerageLink investment option is not available in the Cencora Plan and as such, participants holdings will liquidate into the Fidelity Government Money Market Fund. Participants will be given the opportunity to enroll in the Cencora Plan for future contributions in January 2027. If participants do not enroll within 90 days, they will be automatically enrolled at 5% pre-tax deductions and invested in a corresponding target date default investment option.

SUPPLEMENTAL SCHEDULES

Retina Consultants of America 401(k) Plan

SCHEDULE H, LINE 4(a) - SCHEDULE OF DELINQUENT PARTICIPANT CONTRIBUTIONS

Year ended December 31, 2025

EMPLOYER ID NO: 84-3983059, PLAN #: 001

	Participant Contributions Transferred Late to Plan	Total That Constitute Nonexempt Prohibited Transactions			
	Check Here if Late Participant Loan Repayments are Included: X	Contributions Not Corrected	Contributions Corrected Outside of VFCP	Contributions Pending Correction in VFCP	Total Fully Corrected Under VFCP and PTE 2002-51
2025	$ 90,364	$ 90,364	$ -	$ -	$ -
2024	$ 1,575,596	$ -	$ 1,575,596	$ -	$ -

Retina Consultants of America 401(k) Plan

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

December 31, 2025

EMPLOYER ID NO: 84-3983059, PLAN #: 001

(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
	GG FKLN SM CAP VAL	Collective Trust Fund	**	$ 1,206,452
	AB US LG CP GR CIT L	Collective Trust Fund	**	9,825,865
	PUTNAM STABLE VALUE	Collective Trust Fund	**	3,601,075
	JH CR PL FXD INC 12	Collective Trust Fund	**	3,451,593
	PIF MID CAP EQ IV	Collective Trust Fund	**	1,275,609
	VANG RET SAV TRUST	Collective Trust Fund	**	158,657
	JH DSCPL VAL MDCP B5	Collective Trust Fund	**	2,842,138
	PUTN LG CP VAL TR IA	Collective Trust Fund	**	5,033,292
	ML SV SOLUTIONS L	Collective Trust Fund	**	284,246
		Total Collective Trust Fund		27,678,927
	AF TD INCOME 2010 R6	Registered Investment Company	**	1,539,681
	AF TD INCOME 2020 R6	Registered Investment Company	**	5,068,839
	AF TRGT DATE 2030 R6	Registered Investment Company	**	38,551,153
	AF TRGT DATE 2040 R6	Registered Investment Company	**	39,175,256
	AF TRGT DATE 2050 R6	Registered Investment Company	**	23,915,263
	AF TD INCOME 2015 R6	Registered Investment Company	**	2,261,875
	AF TD INCOME 2025 R6	Registered Investment Company	**	32,113,661
	AF TRGT DATE 2035 R6	Registered Investment Company	**	32,150,560
	AF TRGT DATE 2045 R6	Registered Investment Company	**	36,826,269
	AF TRGT DATE 2055 R6	Registered Investment Company	**	17,637,043
	AF TRGT DATE 2065 R6	Registered Investment Company	**	6,431,339
	HTFD STRAT INC R6	Registered Investment Company	**	3,135,324
	AF TRGT DATE 2060 R6	Registered Investment Company	**	10,384,492
	MFS INTL DIVRSN R6	Registered Investment Company	**	4,119,253
	J H GLOBAL RE N	Registered Investment Company	**	975,724
*	FID US BOND IDX	Registered Investment Company	**	9,577,198
*	FID 500 INDEX	Registered Investment Company	**	73,319,166
*	FID MID CAP IDX	Registered Investment Company	**	7,150,967
*	FID SM CAP IDX	Registered Investment Company	**	6,657,113
*	FID TOTAL INTL IDX	Registered Investment Company	**	10,450,627
*	FID SMALL CAP GR K6	Registered Investment Company	**	3,262,984
*	FID GOVT MMKT K6	Registered Investment Company	**	1,131,442
		Total Registered Investment Company		365,835,229
*	Brokeragelink	Self-Directed Brokerage Accounts including certain Fidelity investment funds	**	52,098,838
		Total investments, at fair value		445,612,994
*	Participant Loans	Interest rates ranging from 4.25% to 9.50% maturity dates through 2037	**	2,681,325
				$ 448,294,319

* Party-in-interest to the Plan.

** Cost omitted for participant-directed investments.

Financial Statements and Report of Independent Certified Public Accountants

Retina Consultants of America 401(k) Plan

December 31, 2025 and 2024

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* All other schedules are omitted as they are not required based on disclosure requirements of the Employee Retirement Security Act of 1974 (ERISA), as amended, and applicable regulations issued by the U.S. Department of Labor.

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REPORT OF INDEPENDENT CERTIFIED PUBLIC ACCOUNTANTS

Trustees
Retina Consultants of America 401(k) Plan

Scope and nature of the ERISA Section 103(a)(3)(C) audit
We have performed audits of the financial statements of Retina Consultants of America 401(k) Plan (the "Plan"), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), as permitted by ERISA Section 103(a)(3)(C) (ERISA Section 103(a)(3)(C) audit). The financial statements comprise the statements of net assets available for benefits as of December 31, 2025 and 2024, and the related statement of changes in net assets available for plan benefits for the year ended December 31, 2025, and the related notes to the financial statements.

Management, having determined it is permissible in the circumstances, has elected to have the audits of the Plan's financial statements performed in accordance with ERISA Section 103(a)(3)(C) pursuant to 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. As permitted by ERISA Section 103(a)(3)(C), our audits need not extend to any statements or information related to assets held for investment of the plan (investment information) by a bank or similar institution or insurance carrier that is regulated, supervised, and subject to periodic examination by a state or federal agency, provided that the statements or information regarding assets so held are prepared and certified to by the bank or similar institution or insurance carrier in accordance with 29 CFR 2520.103-5 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA (qualified institution).

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

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

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

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Basis for opinion
We conducted our audits in accordance with auditing standards generally accepted in the United States of America (US GAAS). Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of the Plan and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our ERISA Section 103(a)(3)(C) audit opinion.

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

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

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

Auditor’s responsibilities for the audit of the financial statements
Except as described in the Scope and Nature of the ERISA Section 103(a)(3)(C) Audit section of our report, our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with US GAAS will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with US GAAS, we:

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

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Plan's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan's ability to continue as a going concern for a reasonable period of time.

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

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

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

Other matter – supplemental schedules required by ERISA
The supplemental schedule of delinquent participant contributions for the year ended December 31, 2025 and schedule of assets (held at end of year) as of December 31, 2025 are presented for purposes of additional analysis and are not a required part of the financial statements but are supplementary information required by the Department of Labor’s Rules and Regulations for Reporting and Disclosure under ERISA. Such supplementary information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedules, other than that agreed to or derived from the certified investment information, has been subjected to the auditing procedures applied in the audits of the financial statements and certain additional procedures. These additional procedures included comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with US GAAS. For information included in the supplemental schedules that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

Grant Thornton

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

In our opinion

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

Grant Thornton LLP

Philadelphia, Pennsylvania
October 9, 2026

Retina Consultants of America 401(k) Plan

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

December 31,

	2025	2024
ASSETS		
Investments, at fair value	$ 445,612,994	$ 351,294,020
Employer contribution receivable	21,179,547	17,435,748
Employee contribution receivable	27,282	29,850
Notes receivable from participants	2,681,325	1,875,473
Total assets	469,501,148	370,635,091
NET ASSETS AVAILABLE FOR BENEFITS	$ 469,501,148	$ 370,635,091

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

Retina Consultants of America 401(k) Plan

STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

Year ended December 31, 2025

Additions	
Investment income	
Net appreciation in fair value of investments	$ 44,629,660
Interest and dividends	18,907,430
Net investment income	63,537,090
Interest income on notes receivable from participants	186,202
Contributions	
Employee	21,439,686
Employer	22,924,166
Rollovers	11,906,756
Total contributions	56,270,608
Total additions	119,993,900
Deductions	
Benefits paid to participants	32,933,116
Administrative expenses	520,739
Total deductions	33,453,855
NET INCREASE IN NET ASSETS AVAILABLE FOR BENEFITS BEFORE TRANSFERS TO THE PLAN	86,540,045
Transfers to the Plan	12,326,012
Net assets available for benefits	
Beginning of year	370,635,091
End of year	$ 469,501,148

The accompanying notes are an integral part of this financial statement.

NOTE 1 - DESCRIPTION OF PLAN

The following description of Retina Consultants of America 401(k) Plan (the "Plan") provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

General

The Plan is a defined contribution (participant-directed) plan established by Retina Group, Inc. DBA Retina Consultants of America (the "Employer" or "Company"). The Plan was established on July 1, 2021. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974, as amended ("ERISA").

The Company supports premier retina practices (the "Practices") across the country. Practices are added to the Plan at varying times throughout the year as participating employers. These Practices either previously sponsored their own defined contribution plan or participated in a Professional Employer Organization defined contribution plan. Such plans were either terminated prior to the Practices joining the Company and these plans' participants' balances were rollovers into this plan or were merged into the Plan and these plan balances were transferred into this plan. Upon entrance into the Plan, the Practices adopted the provisions of the Plan. The total amount of transfers into the Plan from the Practices' plans was $12,326,012.

Eligibility

All employees of the Company or participating employers are eligible to participate in the Plan immediately upon hire. The exceptions to eligible employees are non-resident aliens with no income from a U.S. source, residents of Puerto Rico, those covered by a collective bargaining agreement, and leased employees. The prior plans of the Practices that have merged into the Plan may have had other eligibility provisions. Once the prior plans of the Practices merged into the Plan, they adopted the Plan's eligibility provisions.

Participants become eligible to participate in the Plan according to the table below:

Contribution Type	Age Requirement	Service Requirement	Entry Date
Employee deferral contributions and qualified non-elective contributions	18	None	Immediate upon meeting all eligibility requirements
Employer matching contributions	18	12 month(s)	Immediate upon meeting all eligibility requirements
Employer non-elective contributions	18	12 month(s)	Immediate upon meeting all eligibility requirements
Safe harbor nonelective contributions	18	12 month(s)	Immediate upon meeting all eligibility requirements

The participant, once eligible, remains eligible to participate in the Plan until termination of employment or becoming a member of a class of employees excluded from the Plan. If the participant terminates employment after eligibility is met, and is later re-employed, the participant is eligible to re-enter the Plan upon completion of one hour of service.

Contributions

Participants may elect to defer a pre-tax or Roth percentage of their eligible compensation into the Plan. The percentage of eligible compensation the participant elects will be withheld from each payroll and contributed to an account in the Plan on the participant's behalf. For contributions withheld from the participant's eligible compensation, the percentage deferred is subject to an annual limit of the lesser of 80% of eligible compensation or $23,500 (in 2025; thereafter as adjusted by the Secretary of the Treasury) in a plan year. Participants who are projected to be age 50 or older by the end of the taxable year and who are making deferral contributions to the Plan may also make a catch-up contribution of up to $7,500 (in 2025; thereafter as adjusted by the Secretary of the Treasury).

The Plan also contains a 3% automatic enrollment feature. The participant may stop or change this automatic contribution. Automatic deferral contributions are treated in the same manner as participant-elected deferral contributions.

The Employer has elected to make safe harbor nonelective contributions to all eligible participants in an amount equal to 3% of eligible compensation. Compensation used for employer contributions under the Plan is limited to the Internal Revenue Service ("IRS") limits in effect. For the 2025 Plan year, the maximum compensation that can be considered for employer contributions is $350,000. Participants become eligible for safe harbor nonelective contributions only if they make deferral contributions. The Plan includes a discretionary employer match for eligible participants. The eligible participant allocable share of the discretionary match employer contribution is a percentage of the eligible compensation made by the participant during the contribution period. For the Plan year ended December 31, 2025, there were no discretionary employer match. The Employer may also make additional discretionary nonelective contributions to eligible participants. Certain practices had discretionary nonelective contributions which totaled approximately $3,219,602 as of December 31, 2025.

Participants, eligible employees who have not yet satisfied the Plan's eligibility criteria, and inactive participants who have not terminated employment can roll over part or all of an eligible rollover distribution received from an eligible retirement plan into this Plan. The Plan also allows participants to make in-plan Roth rollover contributions and in-plan Roth conversions.

Participant Accounts

Each participant's account is credited with the participant's contributions and employer contributions and are adjusted for investment earnings and/or losses. Accounts are also charged with an allocation of administrative expenses. Allocations are based on Plan terms. The benefit to which a participant is entitled is based on the amount contained in the individual's vested account.

Participants direct the investment of their account balance into various investment options offered by the Plan and may change their investment options at any time, subject to the terms of the Plan.

Fund fees are charged to participants' accounts as a reduction of the return earned on each investment option.

Vesting Provisions

Participants are 100% vested in their rollover contributions, qualified nonelective contributions, deferral contributions, safe harbor nonelective employer contributions, and any earnings thereon. Discretionary employer matching contributions and discretionary employer nonelective contributions and any earnings thereon will be vested in accordance with the Plan's vesting schedule. Participants receive vesting credit for the number of years worked for their employer and any related employer. A participant with less than two years of service is 0% vested.

Vesting increases by 20% each year and a participant is 100% vested after six years of service. Prior vesting schedules may apply to various participant accounts that merged into the Plan.

Notes Receivable From Participants

The Plan allows participants to borrow amounts not to exceed the lesser of (a) $50,000 reduced by the excess of the highest outstanding balance of loans from the Plan to the participant or beneficiary during the prior one-year period over the outstanding loan balance as of the date such loan is made, or (b) 50% of the vested interest in the participant's account. The loans are secured by the balance in the participant's account. The loan interest rate shall bear a reasonable rate of interest as determined by the Plan Administrator based on prevailing interest rates. Principal and interest is paid ratably through payroll deductions. Loans are required to be repaid over not more than five years unless the loan is used to acquire a principal place of residence, in which case the repayment period cannot exceed 10 years. A participant may have one loan outstanding at the same time.

Payment of Benefits

Upon termination of service, retirement, death or total permanent disability, a participant may elect to receive a distribution of their entire accumulated Plan balance, subject to the terms of the Plan. Distribution options include lump-sum payments, partial payments, annuities, or installments. Participants may elect in-service withdrawals of their elective deferral account balance for hardship purposes. Participants may request an in-service distribution from all vested accounts at age 59½, or from certain other accounts after meeting certain criteria. Minimum distributions are required for participants who have reached the required age per IRS regulations. In the case of participant death, payment(s) of the vested value of the participants' account will be made to a beneficiary as designated by the participant.

Forfeited Accounts

Forfeitures arising during the Plan year are used to pay administrative expenses under the Plan at any time. Any forfeitures not used to pay administrative expenses under the Plan shall be applied to reduce the Employer contributions or allocated to participant accounts. Forfeitures of terminated non-vested participant accounts in the amount of $459,457 were used to reduce employer contributions in 2025. Forfeiture balances were $291,056 and $516,463 for the Plan years ended December 31, 2025 and 2024, respectively.

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

A summary of significant accounting policies follows:

Basis of Accounting

The Plan's financial statements are prepared using the accrual basis of accounting in conformity with accounting principles generally accepted in the United States of America ("U.S. GAAP").

Investments Valuation and Income Recognition

The Plan's investments are reported at fair value. Fair value is defined as 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 5 for discussion of fair value measurements.

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

Notes Receivable From Participants

Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Interest income is recorded on the accrual basis. Related fees are recorded as administrative expenses and are expensed when they are incurred. Related fees consist of quarterly maintenance fees and set up fees for loans.

Use of Estimates

The preparation of financial statements in conformity with U.S. GAAP requires management to make estimates and assumptions. These estimates and assumptions affect the reported amounts of Plan assets, liabilities, and changes therein and disclosure of contingent assets and liabilities. Actual results could differ from those estimates.

Payment of Benefits

Benefits are recorded when paid.

Administrative Expenses

Most costs, fees, and other administrative expenses are paid from the Plan and are allocated to participant accounts in the Plan. Certain expenses of maintaining the Plan are paid by the Plan, unless otherwise paid by the Company. Expenses that are paid by the Company are excluded from these financial statements.

Investment Fees

Investment fees are netted against investment income.

NOTE 3 - INFORMATION CERTIFIED BY THE TRUSTEE

The Plan Administrator has elected the method of annual reporting compliance permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, Fidelity Management Trust Company has certified that the following data included in the financial statements and supplementary schedule is complete and accurate:

- Investments at fair value and notes receivable from participants, as shown in the statements of net assets available for benefits as of December 31, 2025 and 2024.
- Investment income and interest income on notes receivable from participants, as shown in the statement of changes in net assets available for benefits for the year ended December 31, 2025.
- Schedule of assets (held at end of year) as of December 31, 2025.

NOTE 4 - FAIR VALUE MEASUREMENTS

U.S. GAAP establishes a framework for measuring fair value. The framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1) and the lowest priority to unobservable inputs (Level 3). The three levels of the fair value hierarchy are described as follows:

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

Level 2 - Inputs to the valuation methodology include:

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

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

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

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

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

Registered investment companies: Valued at the daily closing price as reported by the fund. Funds held by the Plan are registered with the Securities and Exchange Commission. These funds are required to publish their daily net asset value ("NAV") and to transact at that price. These funds held by the Plan are deemed to be actively traded.

Self-directed brokerage accounts: Accounts primarily consist of registered investment companies, bond funds, and common stocks that are valued on the basis of readily determinable market prices.

Collective trust funds: Valued at the NAV of units of the collective trust. The NAV is used as a practical expedient to estimate fair value. Participant transactions, purchases and sales, may occur daily. The collective investment funds provide for daily redemptions by the Plan at reported NAV per share, with no advance notice requirement. These funds are included as a reconciling item to the fair value table. There are no unfunded commitments.

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

	2025			
	Level 1	Level 2	Level 3	Total
Registered investment companies	$ 365,835,229	$ -	$ -	$ 365,835,229
Self-directed brokerage accounts	52,098,838	-	-	52,098,838
Subtotal	$ 417,934,067	$ -	$ -	417,934,067
Investments valued at NAV				27,678,927
Total investments, at fair value				$ 445,612,994

	2024			
	Level 1	Level 2	Level 3	Total
Registered investment companies	$ 306,070,373	$ -	$ -	$ 306,070,373
Self-directed brokerage accounts	38,802,317	-	-	38,802,317
Subtotal	$ 344,872,690	$ -	$ -	344,872,690
Investments valued at NAV				6,421,330
Total investments, at fair value				$ 351,294,020

NOTE 5 - TAX STATUS

The Plan utilizes a volume submitter document sponsored by Fidelity Management Research Company ("Fidelity"). Fidelity obtained its latest opinion letter on June 30, 2020, in which the IRS stated that the Plan was designed in accordance with the applicable sections of the Internal Revenue Code (the "IRC"). Although the Plan has been amended since receiving the opinion letter, the Company believes that the Plan is designed, and is currently being operated, in compliance with the applicable requirements of the IRC and, therefore, believes that the Plan is qualified and the related trust is tax-exempt.

The Company has identified certain operational errors for the years ended December 31, 2025 and 2024 and intends to correct these errors under the IRS' Employee Plans Compliance Resolution System. The corrective action is not expected to be significant to the Plan. The Company believes that the resolution of the errors will have no impact on the Plan's tax status.

U.S. GAAP requires plan management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the IRS. The Plan Administrator has analyzed the tax positions taken by the Plan and

has concluded that as of December 31, 2025 and 2024, there are no uncertain positions taken or expected to be taken that would require recognition of a liability (or asset) or disclosure in the financial statements.

The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

NOTE 6 - RELATED-PARTY AND PARTY IN INTEREST TRANSACTIONS

Certain Plan investments are managed by Fidelity or an affiliate thereof. Fidelity is the trustee and recordkeeper for the Plan and these transactions qualify as party in interest transactions. Certain administrative functions are performed by officers and employees of the Company. No officer or employee receives compensation from the Plan for these services. Certain administrative fees related to the administration of the Plan are paid by the Plan or by the Company. Expenses paid by the Company are excluded from these financial statements. Notes receivable from participants held by the Plan are also considered party-in-interest transactions.

Such transactions are permitted under the provisions of the Plan and are exempt from the prohibited transactions rules under ERISA.

During the Plan years ended on December 31, 2025 and 2024, the Company inadvertently failed to deposit participant deferrals within the required timeframe as stated by the United States Department of Labor (“DOL”) regulations. The DOL considers late deposits to be non-exempt prohibited transactions. The Company is in the process of correcting the 2025 late contributions and has corrected the 2024 late contributions. Any lost earnings and excise tax payments, if applicable, will be made from the Company’s assets and not from assets of the Plan.

NOTE 7 - PLAN TERMINATION

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

NOTE 8 - RISKS AND UNCERTAINTIES

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

NOTE 9 - RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500

The following is a reconciliation of net assets available for benefits per the financial statements at December 31, 2025 and 2024, to Form 5500:

	2025	2024
Net assets available for benefits per the financial statements	$ 469,501,148	$ 370,635,091
Current year employer contribution receivable	-	(17,435,748)
Current year employee contribution receivable	-	(29,850)
Net assets per Form 5500	$ 469,501,148	$ 353,169,493

The following is a reconciliation of the net increase in net assets available for benefits per the financial statements for the year ended December 31, 2025, to Form 5500:

	2025
Net increase in net assets available for benefits per the financial statements	$ 86,540,045
Prior year employer contribution receivable	17,435,748
Prior year employee contribution receivable	29,850
Net increase per Form 5500	$ 104,005,643

NOTE 11 - SUBSEQUENT EVENTS

Management has completed its evaluation of potential subsequent events. This evaluation was completed through October 9, 2026, the date the financial statements were available to be issued. The Plan will continue to have Practices join the Plan from time to time. Effective December 31, 2026, this Plan will merge into the Cencora Employee Investment Plan. Participant account balances will transfer to the Fidelity Freedom Blend Commingled Pool Class T target date fund that has a target retirement date closest to the year the participant assumes a retirement age of 65. BrokerageLink investment option is not available in the Cencora Plan and as such, participants holdings will liquidate into the Fidelity Government Money Market Fund. Participants will be given the opportunity to enroll in the Cencora Plan for future contributions in January 2027. If participants do not enroll within 90 days, they will be automatically enrolled at 5% pre-tax deductions and invested in a corresponding target date default investment option.

SUPPLEMENTAL SCHEDULES

Retina Consultants of America 401(k) Plan

SCHEDULE H, LINE 4(a) - SCHEDULE OF DELINQUENT PARTICIPANT CONTRIBUTIONS

Year ended December 31, 2025

EMPLOYER ID NO: 84-3983059, PLAN #: 001

	Participant Contributions Transferred Late to Plan	Total That Constitute Nonexempt Prohibited Transactions			
	Check Here if Late Participant Loan Repayments are Included: X	Contributions Not Corrected	Contributions Corrected Outside of VFCP	Contributions Pending Correction in VFCP	Total Fully Corrected Under VFCP and PTE 2002-51
2025	$ 90,364	$ 90,364	$ -	$ -	$ -
2024	$ 1,575,596	$ -	$ 1,575,596	$ -	$ -

Retina Consultants of America 401(k) Plan

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

December 31, 2025

EMPLOYER ID NO: 84-3983059, PLAN #: 001

(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
	GG FKLN SM CAP VAL	Collective Trust Fund	**	$ 1,206,452
	AB US LG CP GR CIT L	Collective Trust Fund	**	9,825,865
	PUTNAM STABLE VALUE	Collective Trust Fund	**	3,601,075
	JH CR PL FXD INC 12	Collective Trust Fund	**	3,451,593
	PIF MID CAP EQ IV	Collective Trust Fund	**	1,275,609
	VANG RET SAV TRUST	Collective Trust Fund	**	158,657
	JH DSCPL VAL MDCP B5	Collective Trust Fund	**	2,842,138
	PUTN LG CP VAL TR IA	Collective Trust Fund	**	5,033,292
	ML SV SOLUTIONS L	Collective Trust Fund	**	284,246
		Total Collective Trust Fund		27,678,927
	AF TD INCOME 2010 R6	Registered Investment Company	**	1,539,681
	AF TD INCOME 2020 R6	Registered Investment Company	**	5,068,839
	AF TRGT DATE 2030 R6	Registered Investment Company	**	38,551,153
	AF TRGT DATE 2040 R6	Registered Investment Company	**	39,175,256
	AF TRGT DATE 2050 R6	Registered Investment Company	**	23,915,263
	AF TD INCOME 2015 R6	Registered Investment Company	**	2,261,875
	AF TD INCOME 2025 R6	Registered Investment Company	**	32,113,661
	AF TRGT DATE 2035 R6	Registered Investment Company	**	32,150,560
	AF TRGT DATE 2045 R6	Registered Investment Company	**	36,826,269
	AF TRGT DATE 2055 R6	Registered Investment Company	**	17,637,043
	AF TRGT DATE 2065 R6	Registered Investment Company	**	6,431,339
	HTFD STRAT INC R6	Registered Investment Company	**	3,135,324
	AF TRGT DATE 2060 R6	Registered Investment Company	**	10,384,492
	MFS INTL DIVRSN R6	Registered Investment Company	**	4,119,253
	J H GLOBAL RE N	Registered Investment Company	**	975,724
*	FID US BOND IDX	Registered Investment Company	**	9,577,198
*	FID 500 INDEX	Registered Investment Company	**	73,319,166
*	FID MID CAP IDX	Registered Investment Company	**	7,150,967
*	FID SM CAP IDX	Registered Investment Company	**	6,657,113
*	FID TOTAL INTL IDX	Registered Investment Company	**	10,450,627
*	FID SMALL CAP GR K6	Registered Investment Company	**	3,262,984
*	FID GOVT MMKT K6	Registered Investment Company	**	1,131,442
		Total Registered Investment Company		365,835,229
*	Brokeragelink	Self-Directed Brokerage Accounts including certain Fidelity investment funds	**	52,098,838
		Total investments, at fair value		445,612,994
*	Participant Loans	Interest rates ranging from 4.25% to 9.50% maturity dates through 2037	**	2,681,325
				$ 448,294,319

* Party-in-interest to the Plan.

** Cost omitted for participant-directed investments.