Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code).

▶ **Complete all entries in accordance with the instructions to the Form 5500.**

OMB Nos. 1210-0110
1210-0089

2025

This Form is Open to Public Inspection

Part I Annual Report Identification Information

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

A This return/report is for:
- [ ] a multiemployer plan
- [ ] a multiple-employer plan (Filers checking this box must provide participating employer information in accordance with the form instructions.)
- [X] a single-employer plan
- [ ] a DFE (specify) _____

B This return/report is:
- [ ] the first return/report
- [ ] the final return/report
- [ ] an amended return/report
- [ ] a short plan year return/report (less than 12 months)

C If the plan is a collectively-bargained plan, check here. . . . . ▶ [ ]

D Check box if filing under:
- [X] Form 5558
- [ ] automatic extension
- [ ] the DFVC program
- [ ] special extension (enter description)

E If this is a retroactively adopted plan permitted by SECURE Act section 201, check here. . . . . ▶ [ ]

Part II Basic Plan Information—enter all requested information

1a Name of plan
PREMIER HOLDINGS, LLC 401(K) RETIREMENT SAVINGS PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 02/01/2019

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)
PREMIER HOLDINGS, LLC

3343 PERIMETER HILL DRIVE
SUITE 214
NASHVILLE, TN 37211

2b Employer Identification Number (EIN)
83-1227176

2c Plan Sponsor's telephone number
651-468-2920

2d Business code (see instructions)
524290

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.	10/13/2026	STEVE MOSER
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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

5	Total number of participants at the beginning of the plan year	**5**	310
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)**	261
a(2)	Total number of active participants at the end of the plan year	**6a(2)**	248
b	Retired or separated participants receiving benefits	**6b**	0
c	Other retired or separated participants entitled to future benefits	**6c**	56
d	Subtotal. Add lines **6a(2)**, **6b**, and **6c**.	**6d**	304
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	0
f	Total. Add lines **6d** and **6e**.	**6f**	304
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)**	294
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)**	301
h	Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.	**6h**	12
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:

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

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

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

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

a Pension Schedules

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

b General Schedules

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

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

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

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

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

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

Receipt Confirmation Code_____

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

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

A Name of plan
PREMIER HOLDINGS, LLC 401(K) RETIREMENT SAVINGS PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
PREMIER HOLDINGS, LLC

D Employer Identification Number (EIN)
83-1227176

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

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

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

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	RECORDKEEPER	20724	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [X] No [ ]

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

USI ADVISORS INC

06-1397347

(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	13829	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] 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	10415	Yes [ ] No [X]	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.
MFS MID CAP VALUE R4 - MFS SERVICE 04-2865649	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.
MFS VALUE R3 - MFS SERVICE CENTER 04-2865649	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.
NORTHERN SM CAP VAL - THE NORTHERN 225 GEORGE STREET SUITE 40.3, LEVEL 40, GROSVENOR SYDNEY NSW 2 AU	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.
PIF REAL EST SEC IS - PRINCIPAL SH 711 HIGH STREET DES MOINES, IA 50392	0.10%

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

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

(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
PREMIER HOLDINGS, LLC 401(K) RETIREMENT SAVINGS PLAN

B Three-digit plan number (PN) ▶ 001

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
PREMIER HOLDINGS, LLC

D Employer Identification Number (EIN)
83-1227176

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: MIP CL 1

b Name of sponsor of entity listed in (a): FIDELITY MANAGEMENT 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)
04-3022712-024	C	985384

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

a Plan name

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

a Plan name

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

a Plan name

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

a Plan name

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

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

a Plan name

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

a Plan name

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

a Plan name

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

SCHEDULE H (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Financial Information

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

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

OMB No. 1210-0110

2025

This Form is Open to Public Inspection

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

A Name of plan
PREMIER HOLDINGS, LLC 401(K) RETIREMENT SAVINGS PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
PREMIER HOLDINGS, LLC

D Employer Identification Number (EIN)
83-1227176

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	22171
(2) Participant contributions	1b(2)	0	0
(3) Other	1b(3)	0	0
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	1561	1625
(2) U.S. Government securities	1c(2)	0	0
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)	0	0
(B) All other	1c(3)(B)	0	0
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)	0	0
(B) Common	1c(4)(B)	0	0
(5) Partnership/joint venture interests	1c(5)	0	0
(6) Real estate (other than employer real property)	1c(6)	0	0
(7) Loans (other than to participants)	1c(7)	0	0
(8) Participant loans	1c(8)	352873	326333
(9) Value of interest in common/collective trusts	1c(9)	770096	985384
(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)	17610475	22138329
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)	0	0
(15) Other	1c(15)	0	0

		(a) Beginning of Year	(b) End of Year
1d Employer-related investments:			
(1) Employer securities	1d(1)	0	0
(2) Employer real property	1d(2)	0	0
1e Buildings and other property used in plan operation	1e	0	0
1f Total assets (add all amounts in lines 1a through 1e)	1f	18735005	23473842
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	18735005	23473842

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)	429572	
(B) Participants	2a(1)(B)	1318348	
(C) Others (including rollovers)	2a(1)(C)	27214	
(2) Noncash contributions	2a(2)	0	
(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		1775134
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	64	
(B) U.S. Government securities	2b(1)(B)	0	
(C) Corporate debt instruments	2b(1)(C)	0	
(D) Loans (other than to participants)	2b(1)(D)	0	
(E) Participant loans	2b(1)(E)	28298	
(F) Other	2b(1)(F)	0	
(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		28362
(2) Dividends: **(A)** Preferred stock	2b(2)(A)	0	
(B) Common stock	2b(2)(B)	0	
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	1125276	
(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		1125276
(3) Rents	2b(3)		0
(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)	0	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	0	
(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		0
(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)	0	
(B) Other	2b(5)(B)	0	
(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		0

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		36850
(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)		2304930
c Other income	2c		0
d Total income. Add all **income** amounts in column (b) and enter total	2d		5270552
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	480338	
(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)		480338
f Corrective distributions (see instructions)	2f		6409
g Certain deemed distributions of participant loans (see instructions)	2g		0
h Interest expense	2h		0
i Administrative expenses:			
(1) Salaries and allowances	2i(1)	0	
(2) Contract administrator fees	2i(2)	0	
(3) Recordkeeping fees	2i(3)	20724	
(4) IQPA audit fees	2i(4)	0	
(5) Investment advisory and investment management fees	2i(5)	24244	
(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)		44968
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		531715
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		4738837
l Transfers of assets:			
(1) To this plan	2l(1)		0
(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: FMC CPAS, LLC **(2)** EIN: 83-1514211

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

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

Part IV Compliance Questions

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

During the plan year:

		Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)	**4a**		X	
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)	**4b**		X	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	**4c**		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)	**4d**		X	
e Was this plan covered by a fidelity bond?	**4e**	X		5000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	**4f**		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	**4g**		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	**4h**		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	**4i**	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)	**4j**		X	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	**4k**		X	
l Has the plan failed to provide any benefit when due under the plan?	**4l**		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	**4m**		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	**4n**		X	

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
PREMIER HOLDINGS, LLC 401(K) RETIREMENT SAVINGS PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
PREMIER HOLDINGS, LLC

D Employer Identification Number (EIN)
83-1227176

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 .

PREMIER HOLDINGS, LLC
401(k) RETIREMENT SAVINGS PLAN

AUDITED FINANCIAL STATEMENTS AND SUPPLEMENTAL SCHEDULE

December 31, 2025 and 2024

PREMIER HOLDINGS, LLC
401(k) RETIREMENT SAVINGS PLAN

FINANCIAL STATEMENTS AND SUPPLEMENTAL SCHEDULE

December 31, 2025 and 2024

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INDEPENDENT AUDITOR'S REPORT

To the Retirement Plan Administrative Committee
Premier Holdings, LLC
401(k) Retirement Savings Plan
Nashville, Tennessee

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

We have performed an audit of the accompanying financial statements of **Premier Holdings, LLC 401(k) Retirement Savings 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 statement of net assets available for benefits as of December 31, 2025 and 2024, and the related statement of changes in net assets available for benefits for the years then ended, and the related notes to the financial statements.

Management, having determined it is permissible in the circumstances, has elected to have the audits of the Plan's financial statements performed in accordance with ERISA Section 103(a)(3)(C) pursuant to 29 CFR 2520.103-8 of the Department of Labor's 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 years then ended, stating that the certified investment information, as described in Notes C, D, and E to the financial statements, is complete and accurate.

Opinion

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

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

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

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America ("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 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 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 audit 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.

Supplemental Schedule Required by ERISA

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

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

In our opinion—

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

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

FMC CPAs, PLLC

Nashville, Tennessee
October 9, 2026

PREMIER HOLDINGS, LLC
401(k) RETIREMENT SAVINGS PLAN

STATEMENT OF NET ASSETS AVAILABLE FOR BENEFITS

		December 31	
		2025	2024
ASSETS			
Cash		$ 1,625	$ 1,561
Investments - Unaudited			
Shares of mutual funds, at fair value	(Note D)	22,138,329	17,610,475
Shares of managed income portfolio stable value fund, at net asset value	(Note E)	1,016,489	819,377
Total Investments		23,154,818	18,429,852
Receivables			
Employer contributions		22,171	0
Notes receivable from participants		326,333	352,873
Total Receivables		348,504	352,873
TOTAL ASSETS		23,504,947	18,784,286
LIABILITIES		0	0
NET ASSETS AVAILABLE FOR BENEFITS		$ 23,504,947	$ 18,784,286

See notes to financial statements.

PREMIER HOLDINGS, LLC
401(k) RETIREMENT SAVINGS PLAN

STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

	December 31	
	2025	2024
ADDITIONS TO NET ASSETS		
Cash contributions from:		
Employer contributions	$ 429,571	$ 318,970
Participants	1,318,348	1,106,156
Other - Participant rollovers	27,214	103,608
Total Contributions	1,775,133	1,528,734
Investment Income - Unaudited:		
Dividends	1,125,276	847,395
Net investment gain from common/collective trusts	18,674	16,863
Net appreciation in fair value of investments	2,304,930	1,403,897
	3,448,880	2,268,155
Interest income	28,363	27,087
Total Additions	5,252,376	3,823,976
DEDUCTIONS FROM NET ASSETS		
Benefits paid to participants	486,746	1,781,786
Deemed distributed loans	0	1,985
Administrative fees	44,969	27,373
Total Deductions	531,715	1,811,144
NET INCREASE DURING THE PLAN YEAR	$ 4,720,661	$ 2,012,832
NET ASSETS AVAILABLE FOR BENEFITS		
Beginning of Plan Year	18,784,286	16,771,454
End of Plan Year	$ 23,504,947	$ 18,784,286

See notes to financial statements.

PREMIER HOLDINGS, LLC
401(k) RETIREMENT SAVINGS PLAN

NOTES TO FINANCIAL STATEMENTS

December 31, 2025 and 2024

NOTE A -- DESCRIPTION OF THE PLAN

The following description of the Premier Holdings, LLC 401(k) Retirement Savings Plan (the "Plan") provides only general information. Participants may review the Plan's "Adoption Agreement" for a more complete presentation of the Plan's provisions. Copies of this document are available from the Plan administrator.

General: Premier Holdings, LLC, established the Premier Holdings, LLC 401(k) Retirement Savings Plan (the "Plan"), effective February 1, 2019, as a qualified, defined contribution, retirement benefits plan for its eligible employees, as well as the eligible employees of certain companies affiliated by common ownership. In addition to Premier Holdings, LLC (the "Company"), the participating employers include Mendota Insurance Company, Inc. ("Mendota") and Advantage Auto Payroll, LLC ("Advantage"). Effective January 1, 2020, the Plan was amended to add Tennessee Auto Insurance Agency, Inc. as a participating employer. Effective October 30, 2025, the Company sold 100% of its ownership in Advantage to Winged Foot Holdings, LLC, an affiliated company. In addition, effective December 8, 2025, the Company sold 100% of its ownership interest in Mendota to Citadel Partners Insurance Company, LLC, another affiliated company. The sale of subsidiaries did not alter the participation in the Plan by either Advantage or Mendota. Effective in 2026, the Plan changed its name to The Citadel Group 401(k) Retirement Plan and continued Plan operations (Refer to Note I for additional information). (The participating employers are collectively referred to herein as the "Plan sponsor".)

Generally, employees are eligible to participate in the Plan after completing one month of service and continuing active employment with the Plan sponsor. The Plan allows eligible employees to enroll in the Plan on the first day of the month coincident with or subsequent to the date that service time eligibility requirements are satisfied.

The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA"). Participants may review the Plan's basic governing documents, such as the "Plan Document", "Adoption Agreement", and "Summary Plan Description", to supplement the general descriptions of the Plan provisions provided herein.

Plan Administration and Expenses: Designated senior management personnel of the Plan sponsor are responsible for administration of the Plan; however, independent professional service providers are routinely used to assist with administration of the Plan's activities and invested assets. Accordingly, since inception of the Plan, the Plan sponsor has engaged Fidelity Management Trust Company ("Fidelity") to serve as the Plan's trustee and custodian of its invested assets and to execute all investment transactions. (Refer to Note C.)

In addition, Fidelity has been engaged since the Plan's inception to serve as the Plan's third-party administrator and to maintain the Plan's basic governing documents. This includes responsibility for selecting and coordinating using a standardized, IRS approved, plan document on behalf of contracted employers, such as the Plan sponsor, who are adopting or maintaining a defined contribution retirement plan for the benefit of their eligible employees. (Refer to Note H.)

The Plan is primarily responsible for payment of the necessary and reasonable expenses of operating the Plan, and such expenses are routinely allocated among the participants. However, at its sole discretion, the Plan sponsor may elect to pay for selected expenses, such as independent audit services, administrative service fees, and other routine expenses of the Plan. Fees for investment management services and custodial services are deducted from the gross investment yield of the Plan's investments in determining the net investment yield earned by the Plan.

In connection with the Plan's administrative agreement with Fidelity, participants may opt to obtain investment advisory services specific to and for the electing participants' benefit. These services are provided through Fidelity's Personalized Planning and Advice ("PPA") investment service program. Fees for PPA services are charged directly to each electing participant's account.

Contributions: Participants contribute to the Plan via pre-tax salary deferrals (i.e., payroll deductions) in an amount not less than one percent or more than 100 percent of their compensation, as defined in the Plan Adoption Agreement subject to certain Internal Revenue Code limits which are subject to annual adjustment for inflation. Participants can revoke their deferral election at any time but may not change or newly designate a deferral percentage election until the first day of the next month. Contributions representing after-tax salary deferrals (i.e., "Roth" deferrals) are also permitted by the Plan.

The Plan's provisions include an automatic enrollment feature whereby all newly eligible employees are automatically enrolled in the Plan with a default deferral rate set at 3% of eligible compensation. Absent a participant election otherwise, the contribution rate for automatically enrolled employees is increased annually by 1% until the contribution rate reaches 5%.

Additional "catch-up" contributions are allowed for any participant with an age of 50 or older by the end of the calendar year in which the catch-up contributions are made. Electing participants can make additional contributions to the Plan, as permitted by federal statutes once the participant's regular contributions have reached the maximum annual deferral limit specified by statute. Catch-up contributions are includible in the compensation of employer matching contributions described below.

Management determined that excess contributions payable at December 31, 2025 and 2024 were minimal. Therefore, none are accrued as of either reporting date, but any applicable amounts were distributed back to applicable participants prior to April 15 of the subsequent reporting year.

The Plan's participating employers match participant contributions at 50% of the participant contribution up to 5% of the participant's compensation for the reporting period. As amended, the Plan's contribution period for purposes of calculating the amount of employer matching contributions is each Plan year. (Refer to Note B for information on matching contributions receivable by the Plan from employers as of December 31, 2025 and 2024.)

Participant Accounts: Each participant's account is credited with the participant's salary deferral contributions, the employers' matching contributions, and an allocable portion of the Plan's net investment earnings. Participants' accounts are also charged with an allocable portion of administrative expenses paid by the Plan. Participants may also be charged various transaction fees for specific Plan services used and participants who elect to use PPA are charged applicable service fees in proportion to their invested assets balance. Fees for elective Plan services and investment advisory services are deducted directly from the respective participant's account.

Vesting in Employee Contributions, Employer Contributions, and Transferred Assets: Participants are immediately vested in their salary deferral contributions, including any rollovers, plus actual earnings thereon. Vesting in the Plan sponsor's matching contributions plus related earnings is based upon the participant's length of service with the applicable participating employer. However, participants employed on or after early retirement age will be 100% vested regardless of the length of service. Vesting is based on a graduated schedule as follows:

Years of Service	Vesting
Less than 1	0%
1	20%
2	40%
3	60%
4	80%
5 or more	100%

A participant's vesting percentage in employer matching contributions is increased to 100% if the participant's employment is terminated due to disability.

Participants brought into the Plan as of Plan inception, including the transfer of allocated Plan assets from the predecessor plan, are 100% vested for employer matching contributions and their transferred employer safe harbor match contributions related to the predecessor plan.

NOTES TO FINANCIAL STATEMENTS

December 31, 2025 and 2024

Forfeitures: Forfeitures of the non-vested portions of terminated participants' account balances may be used to pay expenses of the Plan, or to reduce future employer matching contributions from the participating employers. The Plan's forfeiture account balance at both December 31, 2025 and 2024 were not significant.

Investment Options: All investment funds held by the Plan are "participant directed." Each participant may select from a menu of available investment options offered by Fidelity, the Plan's trustee, and then specify the portions of their account balance to be allocated to and invested in each selected option. The investment options include: (1) one or more publicly traded mutual funds and (2) a stable value fund with the objective of principal preservation and that invests in a variety of benefit-responsive investment contracts, fixed income securities, and money market funds. (Refer to Notes C and E for additional information.) Participants can revise their specified investment elections at any time.

Benefits Paid to Participants: Upon termination of employment for any reason, the vested portion of a participant's account will generally be paid in a lump-sum distribution if not greater than $5,000, or as directed by the participant, if in excess of $5,000. Withdrawal of part or all of a participant's vested account balance that represents elective deferrals (other than Roth deferrals) and the related net investment earnings may be authorized by the Plan administrator prior to termination of employment if the participant experiences a financial hardship (as defined) that involves an immediate and heavy financial need.

Examples of qualifying hardship circumstances include: funds needed by a participant for the purchase of a principal residence, payment of non-reimbursed family medical expenses, and payment of post-secondary family educational expenses.

Notes Receivable from Participants: Participants may borrow from their fund accounts up to a maximum equal to the lesser of $50,000 or 50% of the vested account balance. Loan terms generally range from 1-5 years. The loans are secured by the balance in the participant's account and bear fixed rates of interest commensurate with local prevailing rates as determined at inception of the loans. Principal and interest are generally paid ratably through payroll deductions.

Plan Termination: Although it has not expressed any intent to do so, the Plan sponsor 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, the trustee shall make distributions to the participants as the employer or administrator directs in accordance with Plan provisions.

NOTE B -- SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Presentation and Year End: The accompanying financial statements of the Plan have been prepared on the accrual basis of accounting, in accordance with accounting principles generally accepted in the United States of America ("U.S. GAAP"). The Plan has elected to use the calendar year as its annual reporting period.

NOTES TO FINANCIAL STATEMENTS

December 31, 2025 and 2024

Use of Estimates: Preparation of financial statements in conformity with U.S. GAAP requires Plan management to make estimates and assumptions that affect certain reported amounts of assets, liabilities, net assets available for benefits, income and expenses, and the disclosure of contingent assets and liabilities. Significant estimates used in preparing these financial statements principally include those assumed in establishing the fair values of investments. Actual results could differ from the significant estimates used by Plan management and such differences could be material.

Investment Valuation and Income Recognition: The Plan's investments are reported at fair value, which is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. Plan management determines the Plan's valuation policies. See Note D for discussion of fair value measurements. Purchases and sales of securities are recorded on a trade-date basis. Dividends are recorded on the ex-dividend date. Net appreciation (depreciation) includes the Plan's gains and losses on investments bought and sold as well as held during the reporting period.

Receivables and Allowance for Credit Losses: Receivables are recorded for contributions and other amounts due to the Plan for financial transactions attributable to a particular reporting period when such amounts are not collected until a subsequent reporting period. An allowance for credit loss is provided when necessary to recognize potentially uncollectible receivables and amounts deemed worthless are written off as determined. Subsequent to each Plan year, management calculates minor true-ups to its matching employer contributions based upon the Plan's provisions. As of December 31, 2025 and 2024, amounts receivable from employers totaled $22,171 and $0, respectively, in employer contributions, which represent true-ups under the Plan's provisions for calculating employer matching contributions by Plan year.

These amounts were initiated for remittance by the Plan sponsor subsequent to each respective reporting period end. An allowance for credit losses for these receivables was deemed unnecessary at both December 31, 2025 and 2024.

Notes Receivable from Participants: Notes receivable from participants are excluded from Plan investments and reported at their unpaid principal balances plus any accrued but unpaid interest. Interest income is recorded on the accrual basis. Related fees are charged directly to the borrowing participant's account and included in administrative expenses when incurred.

As of December 31, 2025 and 2024, no allowance for credit losses has been recorded. If a participant does not make loan repayments and the Plan administrator considers the participant loan to be in default, the loan balance is reduced, and the delinquent participant note receivable is recorded as a benefit payment based on the terms of the Plan document. Interest income on notes receivable from Participants totaled $28,298 and 27,013 for the Plan years ended December 31, 2025 and 2024, respectively.

NOTES TO FINANCIAL STATEMENTS

December 31, 2025 and 2024

Payment of Benefits: Benefits are recorded when paid.

Administrative Expenses: Certain administrative expenses of maintaining the Plan are paid by the Plan sponsor and are therefore excluded from these financial statements. Investment-related expenses are included in the financial statement caption "net appreciation in fair value of investments". Fees for the administration of notes receivable from participants and certain administrative expenses of maintaining the Plan are included in administrative expenses and charged directly to participant accounts.

Income Tax Status: As an employee retirement benefits plan qualified under Internal Revenue Code Section 401, the Plan is exempt from federal and state income taxes, provided that it operates in conformity with applicable laws and regulations. (Refer to Note H for additional information.)

In accordance with U.S. GAAP, the Plan administrator evaluates the federal filing position of the Plan as reported in Form 5500, *Annual Return/Report of Employee Benefit Plan*, to identify uncertain tax positions for consideration of whether to record an estimated liability or disclose a contingent liability, including applicable interest and penalties. The Plan administrator has not identified any uncertain tax positions as of December 31, 2025 and 2024.

The Plan's *Annual Return/Report* is subject to examination by tax and regulatory authorities, generally for a period of three years after the return is filed. As of December 31, 2025, the Plan administrator considers the Plan's open return years to include the *Annual Return/Report* filed for 2022, 2023, 2024, and the return that will be filed for 2025.

NOTE C -- INVESTMENTS – INFORMATION CERTIFIED BY TRUSTEE (UNAUDITED)

As permitted by Section 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA, the Plan's independent auditor did not perform any auditing procedures with respect to the information certified as complete and accurate as of and for the years ended December 31, 2025 and 2024, by the Plan's trustee, except for comparing such information with the related information included in the accompanying financial statements, and supplemental schedule.

Accordingly, information presented in Notes C and D, the accompanying financial statements, and the supplemental schedule that pertains to investments held at December 31, 2025 and 2024, and interest and dividend income and net appreciation (depreciation) in fair value of investments for the years then ended, was obtained from the certification issued by Fidelity Management Trust Company ("FMTC"), and is therefore unaudited.

PREMIER HOLDINGS, LLC
401(k) RETIREMENT SAVINGS PLAN

NOTES TO FINANCIAL STATEMENTS

December 31, 2025 and 2024

Information as of December 31, 2025 and 2024, regarding the various investment options made available by the Plan sponsor and the status of participant directed account allocations in mutual funds and the managed income portfolio stable value fund, is summarized below.

	December 31	
	2025	**2024**
Investments in Mutual Funds, at fair value		
Principal Investment Small Cap Growth Fund	$ 81,221	$ 54,299
Northern Small Cap Value Fund	43,033	118,642
Janus Henderson Enterprise Fund	290,393	282,571
MFS Value Fund	182,560	162,958
MFS Mid Cap Value Fund	271,825	433,795
Invesco Developing Market Fund	199,760	149,975
Principal Invest Fund Real Estate Securities	96,297	87,429
Fidelity Government Income Fund	522,364	512,943
Fidelity OTC Portfolio	2,827,225	2,169,389
Fidelity Freedom Income Fund K6	260	198
Fidelity Freedom Index 2010 K6	62,006	48,815
Fidelity Freedom Index 2020 K6	1,926,665	1,641,347
Fidelity Freedom Index 2030 K6	1,258,443	1,180,662
Fidelity Freedom Index 2040 K6	2,769,695	2,086,932
Fidelity Total Bond Fund	956,951	789,956
Fidelity Freedom Index 2015 K6	381,024	289,330
Fidelity Freedom Index 2025 K6	964,414	897,699
Fidelity Freedom Index 2035 K6	2,202,370	1,734,316
Fidelity Freedom Index 2045 K6	1,472,410	1,078,363
Fidelity Freedom Index 2050 K6	768,839	553,109
Fidelity 500 Index Fund	2,915,573	2,171,560
Fidelity Freedom Index 2055 K6	698,115	474,397
Fidelity Freedom Index 2065 K6	33,729	15,633
Fidelity Small Cap Index	254,135	110,298
Fidelity International Index	519,657	358,606
Fidelity Freedom Index 2060 K6	169,514	103,555
Fidelity Freedom Index 2070 K6	128,464	230
Fidelity Total International Index	141,387	103,468
Total – Investments in Mutual Funds	22,138,329	17,610,475
Investment in Managed Income Portfolio Stable Value Fund, at net asset value		
Fidelity Managed Income Portfolio Class 1	1,016,489	819,377
TOTAL INVESTMENTS	$ 23,154,818	$ 18,429,852

NOTES TO FINANCIAL STATEMENTS

December 31, 2025 and 2024

The Plan offers participants the ability to invest in Fidelity Freedom K6 Funds. These are target-date mutual funds that are designed to provide a diversified investment portfolio based on an intended retirement year. These Funds are institutional share classes offered exclusively through employer-sponsored retirement plans and are offered at relatively low expense ratios.

NOTE D -- FAIR VALUE MEASUREMENTS

Definitions and Hierarchy: As prescribed by U.S. GAAP, provisions relating to fair value measurements define fair value, establish a framework for measuring fair value, establish a fair value hierarchy based on the quality of inputs used to measure fair value, and provide disclosure requirements. Fair value is defined as the price that would be received to sell an asset or paid to transfer a liability (i.e., the "exit price") in an orderly transaction between market participants at the measurement date.

U.S. GAAP establishes a fair value hierarchy for inputs used in measuring fair value that gives the highest priority to observable inputs (Level 1) and the lowest priority to unobservable inputs (Level 3). Observable inputs are those that market participants would use in pricing the asset or liability based on market data obtained from sources independent of the Plan. Unobservable inputs reflect management's assumptions about the inputs market participants would use in pricing the asset or liability based on the best information available in the circumstances.

The fair value hierarchy is categorized into three levels based on the inputs, as follows:

Level 1: Fair values are based on unadjusted quoted prices in active markets for identical assets or liabilities.

Level 2: Fair values are based on quoted prices in markets that are not active or models in which all significant inputs are observable either directly or indirectly.

Level 3: Fair values are based on prices or valuation techniques that require inputs that are both unobservable and significant to the overall fair value measurement.

In certain cases, the inputs used to measure fair value may fall into different levels of the fair value hierarchy. According to U.S. GAAP, in such cases, the level in the fair value hierarchy within which the fair value measurement falls is determined by the lowest level input that is significant to the fair value measurement in its entirety.

Transfers Between Levels of the Fair Value Hierarchy: With respect to investments measured and reported at fair value on a recurring basis, the Plan evaluates at the end of each reporting period whether any event or change in circumstances has occurred that requires an investment to be transferred between levels. No transfers between levels were deemed necessary during 2025 and 2024.

FAIR VALUE MEASUREMENTS – INFORMATION CERTIFIED BY TRUSTEE (UNAUDITED): The financial information presented below was certified as complete and accurate by Fidelity, the Plan's trustee, and is therefore unaudited as previously described in Note C.

Summarized information regarding the fair value of the Plan's total investment interests in mutual funds, categorized in accordance with the U.S. GAAP fair value hierarchy, is as follows:

	Fair Value Measurements Using			
	Level 1	Level 2	Level 3	Total Fair Value
December 31, 2025:				
Mutual Funds	$ 22,138,329	$ 0	$ 0	$ 22,138,329
TOTAL INVESTMENTS, at fair value	$ 22,138,329	$ 0	$ 0	$ 22,138,329
December 31, 2024:				
Mutual Funds	$ 17,610,475	$ 0	$ 0	$ 17,610,475
TOTAL INVESTMENTS, at fair value	$ 17,610,475	$ 0	$ 0	$ 17,610,475

NOTE E -- INVESTMENT IN MANAGED INCOME PORTFOLIO STABLE VALUE FUND REPORTED AT NET ASSET VALUE – INFORMATION CERTIFIED BY TRUSTEE (UNAUDITED)

Investment in Fidelity Managed Income Portfolio Class I Fund: Since its inception, the Plan has included the Fidelity Managed Income Portfolio Class I Fund (the "Fund") as an investment option available to Plan participants. The Fund seeks to preserve principal while earning a level of interest income that is consistent with principal preservation and seeks to maintain a stable net asset value of $1 per share, but no guarantee is made with regard to the stable value objective. The yield of the Fund routinely fluctuates. As of December 31, 2025 and 2024, the balance held by the Plan's participants inside the Fund was reported at its net asset value of $1,016,489 and $819,377, respectively.

The Fund, which is managed by Fidelity Management Trust Company, is not a mutual fund, but rather a stable value fund that is a commingled pool of the Fidelity Group Trust for Employee Benefit Plans (the "Group Trust"). Only qualified, participant-directed, defined contribution plans may invest in the Fund.

NOTES TO FINANCIAL STATEMENTS

December 31, 2025 and 2024

The Fund invests in benefit-responsive investment contracts issued by insurance companies and other financial institutions, fixed income securities, and money market funds. Under the terms of the Fund's contracts with insurance companies and other financial institutions, the assets of the Fund are invested in fixed income securities (which may include, but are not limited to, U.S. Treasury and agency bonds, corporate bonds, mortgage-backed securities, commercial mortgage-backed securities, asset-backed securities, and collective investment vehicles and shares of investment companies that invest primarily in fixed income securities) and shares of money market funds. The Fund may also invest in futures contracts, option contracts, and swap agreements. Fidelity, as investment manager and trustee of the Group Trust, has claimed an exemption from registration under the Commodity Exchange Act (the "Act") and is not subject to registration or regulation under the Act's provisions. At the time of purchase, all contracts and securities purchased for the Fund must satisfy applicable credit quality standards.

NOTE F -- TRANSACTIONS WITH PARTIES-IN-INTEREST

Transactions with parties-in-interest include purchases and sales of assets made through the Trustees and contributions made by the Plan sponsor. In addition, the Plan sponsor pays certain operating expenses incurred in the ongoing administration of the Plan. These transactions are exempt from the prohibited transaction rules of ERISA.

NOTE G - RISKS AND UNCERTANTIES - INVESTMENTS

As more fully described in Note C, the Plan offers various investment options to participants via an investment services agreement with Fidelity. These investment options are inherently exposed to various risks, such as interest rate, market, and credit risks. Due to the varying levels of risk that may be associated with investment interests held by the Plan, it is at least reasonably possible that changes in the values of such investment interests will occur in the near term and that such changes could materially affect the amount of net assets available for benefits and the related amounts of participants' account balances.

A concentration of credit risk may exist periodically with respect to one or more of the investment options held by Plan participants. Accordingly, the Plan is exposed to potential accounting loss in the event that the Plan is unable to recoup its invested funds and accrued earnings following the sale of the applicable investment interests.

NOTE H – TAX STATUS

Effective in 2021, the Plan adopted a non-standardized pre-approved defined contribution plan document developed by Fidelity. This plan was approved by the IRS in a letter dated June 30, 2020. The provisions adopted by the Plan under the non-standardized pre-approved defined contribution plan document are substantially similar to the provisions of the adoption agreement and plan document that governed the Plan from its inception through the end of the 2020 reporting period.

NOTES TO FINANCIAL STATEMENTS

December 31, 2025 and 2024

In its letter, the IRS stated that the form of the non-standardized pre-approved defined contribution plan is acceptable under Internal Revenue Code Section 401 for use by employers for the benefit of their employees. Although the Plan has been amended since its adoption, and a specific determination letter has not been requested by the Plan, the Plan sponsor believes that the Plan has been designed and operated in compliance with the applicable requirements of the Internal Revenue Code.

Plan participants are not subject to federal income taxes on their pre-tax contributions and employer matching contributions, or the related account earnings until they receive a distribution from the Plan. Distributions that are rolled over to another qualified retirement plan generally continue to be tax deferred until ultimate distribution to the participant.

NOTE I - SUBSEQUENT EVENTS

In preparing the accompanying financial statements, management has evaluated subsequent events through October 9, 2026, which represents the date the financial statements were available to be issued.

Effective February 26, 2026, the Plan was amended to add Citadel Partners Insurance, LLC, as a participating employer. In addition, the Plan changed its name from Premier Holdings, LLC 401(k) Retirement Savings Plan to Citadel Group.

PREMIER HOLDINGS, LLC
401(k) RETIREMENT SAVINGS PLAN

NOTES TO FINANCIAL STATEMENTS

December 31, 2025 and 2024

NOTE J - RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500

The following is a reconciliation of net assets available for benefits per the financial statements to "net assets" on Schedule H of Form 5500 as of December 31, 2025:

Net assets available for benefits per the financial statements	$ 23,504,947
Difference in net asset value of managed income portfolio stable value fund per the financial statements and the fair value reported on Schedule H Part I, Line 1c(9)	(31,105)
Net assets available for benefits per Schedule H of Form 5500	$ 23,473,842

The following is a reconciliation of net increase during the reporting period per the financial statements to "net income (loss)" on Schedule H of Form 5500 for the reporting period.

Net increase (decrease) during the reporting period per the financial statements	$ 4,720,661
Difference in net investment gain reported on Schedule H Part II, Line 2b(6) and net investment gain on common/collective trusts recognized in the financial statements from the managed income portfolio stable value fund	18,176
Net income (loss) per Schedule H of Form 5500	$ 4,738,837

SUPPLEMENTAL SCHEDULE

Premier Holdings, LLC 401(k) Retirements Savings Plan

Schedule H, line 4i -- Schedule of Assets (Held at End of Year)

December 31, 2025

Name of plan	Three-digit plan number	
Premier Holdings, LLC 401(k) Retirement Savings Plan		001
Plan sponsor's name as shown on line 2a of form 5500	Employer Identification number	
Premier Holdings, LLC		83-1227176

(a)	(b) Identity of issuer, 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
	Principal Investment Small Cap Growth Fund	Mutual Funds	(1)	$ 81,221
	Northern Small Cap Value Fund	Mutual Funds	(1)	$ 43,033
	Janus Henderson Enterprise Fund	Mutual Funds	(1)	$ 290,393
	MFS Value Fund	Mutual Funds	(1)	$ 182,560
	MFS Mid Cap Value Fund Class R4	Mutual Funds	(1)	$ 271,825
	Invesco Developing Markets Fund	Mutual Funds	(1)	$ 199,760
	Principal Investment Fund Real Estate Securities	Mutual Funds	(1)	$ 96,297
*	Fidelity Government Income Fund	Mutual Funds	(1)	$ 522,364
*	Fidelity OTC Portfolio	Mutual Funds	(1)	$ 2,827,225
*	Fidelity Freedom Income Fund K6	Mutual Funds	(1)	$ 260
*	Fidelity Freedom Index 2010 K6	Mutual Funds	(1)	$ 62,006
*	Fidelity Freedom Index 2020 K6	Mutual Funds	(1)	$ 1,926,665
*	Fidelity Freedom Index 2030 K6	Mutual Funds	(1)	$ 1,258,443
*	Fidelity Freedom Index 2040 K6	Mutual Funds	(1)	$ 2,769,695
*	Fidelity Total Bond Fund	Mutual Funds	(1)	$ 956,951
*	Fidelity Freedom Index 2015 K6	Mutual Funds	(1)	$ 381,024
*	Fidelity Freedom Index 2025 K6	Mutual Funds	(1)	$ 964,414
*	Fidelity Freedom Index 2035 K6	Mutual Funds	(1)	$ 2,202,370
*	Fidelity Freedom Index 2045 K6	Mutual Funds	(1)	$ 1,472,410
*	Fidelity Freedom Index 2050 K6	Mutual Funds	(1)	$ 768,839
*	Fidelity 500 Index Fund	Mutual Funds	(1)	$ 2,915,573
*	Fidelity Freedom Index 2055 K6	Mutual Funds	(1)	$ 698,115
*	Fidelity SmallCap Index	Mutual Funds	(1)	$ 254,135
*	Fidelity International Index	Mutual Funds	(1)	$ 519,657
*	Fidelity Freedom Index 2060 K6	Mutual Funds	(1)	$ 169,514
*	Fidelity Total International Index	Mutual Funds	(1)	$ 141,387
*	Fidelity Freedom Index 2065 K6	Mutual Funds	(1)	$ 33,729
*	Fidelity Freedom Index 2070 K6	Mutual Funds	(1)	$ 128,464
*	Fidelity Managed Income Portfolio Class 1	Common / Collective Trust	(1)	$ 1,016,489
*	Fidelity Government Money Market Fund	Interest Bearing Cash	(1)	$ 1,625
*	Participant Loans	Interest Rate (4.25% to 9.50%)	$0	$ 326,333
		Total		$ 23,482,776

* Represents a party-in-interest. (1) Cost information is not required because investments are participant directed.

See independent auditor's report.